Tommy's

Impact report 2022/23

About us

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We exist to stop the heartbreak and devastation of baby loss by making pregnancy and birth safer for everyone.

We carry out world-leading research that is growing evidence and finding new tests and treatments to reduce miscarriage, stillbirth and premature birth. We provide expert information to guide parents and improve care. We support families who have experienced pregnancy complications or baby loss, breaking the silence to make vital change.

It's supporters like you who make this happen. Thank you for your passion, your incredible support and your ongoing commitment to saving babies' lives.

We research. We support. We care.

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The Tommy's team offered us reassurance, empathy and their expertise made us feel hopeful that Arthur would be delivered safely – which he was in August 2022. We are forever grateful for the support we received and will always hold Tommy's close to our hearts."

Following the loss of her first daughter Ada at 34 weeks, Gemma was cared for by our Rainbow Clinic in Manchester, where she welcomed her son Arthur.

A year of saving babies' lives





Welcome from our Chair and Chief Executive



Joe Chambers Tommy's Chair



Kath Abrahams Tommy's Chief Executive

Right now, 1 in 4 pregnancies end in loss during pregnancy and birth. Tommy's is here to change that.

We're already implementing changes that are making pregnancy safer and saving babies' lives.

- Through our research, we're developing new tests and tools to assess the risk of recurrent miscarriage.
- Through our Tommy's Rainbow clinics, we're helping other hospitals adopt our specialist model of care for families who have already experienced stillbirth or neonatal death.
- Through our online resources, we're providing people with the right information and support including a new hub for dads and partners.

You can find out more about our work in this report.

None of this would be possible without our passionate supporters. Whether you're a runner training in all weathers to fundraise for us; a family bravely sharing your story to raise awareness; a manager improving the support for colleagues through a complicated pregnancy; or one of our amazing partners, your dedication and support is invaluable. This year, our fundraising total surpassed £10m for the first time – and every penny is a testament to the strength of our community. We've been grateful, too, for the insightful input of our supporters when developing our new strategy. Through workshops, focus groups and many conversations with our partners and communities, we've identified the new vision, mission, values and goals that will guide us as a charity over the next decade. As well as providing direction and focus, our new strategy also makes explicitly clear our commitment to tackling healthcare disparities and inequities for those most at risk.

Our collaboration with Sands, to form the Joint Policy Unit, will play an important part in tackling inequities in maternal care. The Ockenden review, East Kent report and other investigations into the safety of maternity and neonatal services show how much pressure services are under and how many women, birthing people and their families are being failed. It's crucial to ensure lessons learned from these reviews are turned into meaningful change, and we won't stop until they are.

There's still so much to be done, but your support will make the world of difference. Thank you for joining us on this next stage of our journey as we work to stop the heartbreak and devastation of baby loss and make pregnancy and birth safe – for everyone. Our new 10-year strategy launched in May 2023, but work was underway long before this to put it together. Many months in the making, we're proud the strategy truly reflects the passion and invaluable insight of our researchers, our colleagues, our trustees, our key stakeholders and our supporters.

Together, we identified the ways we make change, from scientific discovery through to campaigning and raising awareness, and how these help us save babies' lives. Our new vision, mission and goals provide areas of focus for the next decade of Tommy's, while clear values underpin our work as a charity.

This strategy will help us have the greatest impact possible and, against a backdrop of difficult economic times for everyone, make sure we use our funding in the most efficient and effective way.

Goals

- 1 Grow evidence, because baby loss and pregnancy complications aren't 'just one of those things'.
- 2 Improve care, because everyone should be provided with the best care and support.
- **3** Tackle inequities, because everyone deserves the same opportunities for a healthy pregnancy and birth.
- 4 Mobilise for change, because together, we will make pregnancy safer and save babies' lives.

Vision

To stop the heartbreak and devastation of baby loss and make pregnancy and birth safe – for everyone.

Mission

We lead research and transform care. We provide expert information and support throughout the pregnancy journey. Working with communities and partners we challenge inequities and campaign for change to make pregnancy and birth safer for all. Together, we save babies' lives.

Values

We are evidence-driven: we find and follow evidence, and it guides us in achieving the greatest impact.



We are inclusive:

we put tackling inequities at the heart of everything we do and treat everyone with empathy, consideration and care.



We are collaborative:

we know we're stronger when we work together and build lasting relationships with communities and partners.

We are courageous:

we are bold and unafraid to challenge established systems and thinking.



Highlights during our last 5-year strategy



Together, we can provide much-needed support for dads and partners

The problem

70% of partners told us support during and after pregnancy was not good or non-existent and 38% of new dads worry about their mental health. For those who experienced baby loss, 60% of partners said they need help to open up in order to prevent isolation.

Based on this research, and our own conversation with supporters, we knew more help was needed.

Why it matters

Partners have an important role to play in the whole pregnancy journey, but our research found there's a lack of information specifically aimed at partners and no real space to ask questions.

Partners often feel they don't have the right to ask questions or seek support, especially where there are complications or loss – with many partners feeling like they need to be 'the strong one', often suppressing their own grief.

The solution

We created a hub dedicated to dads and partners covering every aspect of the pregnancy journey, from preconception and fertility to pregnancy, birth and loss. It's an online space that includes information, resources and advice from other dads and LGBTQ+ parents who have gone, and are going through, the pregnancy journey.

Our aim was to make sure we connected with dads and partners who might need us, but not have heard of us. To do this, we launched the hub with an awareness campaign – #InThisWithYou – and moved away from traditional media to target channels ranging from beer mats to Spotify and Reddit. "When we found out at the hospital that we'd lost our baby I felt like a spare part – not a single question put to me."

64% of partners who experience baby loss say they need help to open up.

> Tommy's Together, for every baby



#InThisWithYou

Supporting you to support them. #InThisWithYou Tommy's





"Lesbian non-gestating parents are invisible and not acknowledged."

Raj's story

After 3 years trying for a baby, a difficult pregnancy, then 7 months in and out of hospital with our son, we never expected that we'd lose him.

It took us a long time to fall pregnant and we were trying for 3 years. One morning my wife, Sharan, woke me up at 4am with a positive test and from that moment everything changed – the dad responsibilities started and I felt wary but also the happiest I'd ever been.

It was a difficult pregnancy; our son was measuring small so we had regular growth scans and the last few months were very stressful. When he was born, Riaan weighed just 4lb 2oz and, while there were other issues like 2 holes in his heart and hearing loss, he was such a happy baby. Having him home was the best thing ever.

One night, when he was 7 months old, I saw his head move on the baby monitor and thought he'd been sick. When I went in to clean him up he was foaming at the mouth and unresponsive. We called an ambulance and were rushed to hospital, but we lost him that night. They cleared the machines, wrapped him in a blanket and we spent some time with him.

"I'm not used to being the one needing help but losing Riaan completely broke me."

I wanted to be strong for Sharan but he's my baby too and I needed support, yet people kept telling me I had to be strong for my wife. Guys need to be told it's safe to open up, it's not weakness to say, **'I'm hurting, I need help too'.**

Raj took part in our #InThisWithYou campaign.



"People would tell me to be strong for Sharan which felt like telling me I couldn't grieve."

Campaign results

35% of surveyed men aged 25–48 said they had seen the campaign

3,000

visits to the support hub

500K people watched our videos

2.7% more male visitors to the website

Winner

Best Integrated Digital PR Campaign at the UK Digital PR Awards



We know that dads and partners are on the pregnancy journey too.

Tommy's is #InThisWithYou

Visit our Dads and Partners hub for information support and stories from other partners.



🔰 #InThisWithYou

Tommy's

Our research centres are leading the way, helping us understand the causes of baby loss and pregnancy complications, and finding new tests and treatments to save more babies' lives. Our Centre Directors play a crucial role in setting the direction of travel for our work and driving real change for families affected by baby loss.



Professor Arri Coomarasamy is Director of Tommy's National Centre for Miscarriage Research.

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I'm proud of the work we've been doing this year to change the narrative that miscarriage is 'just one of those things' for women and birthing people across the UK. We've discovered new biomarkers in the womb that tell us whether the risk of future miscarriage is higher, and we've developed technology to help us understand what might be causing miscarriage at a cellular level. We launched the Miscarriage Support Tool to help women and birthing people understand their risk of miscarriage and what intervention and treatments are available, and we're working tirelessly to develop effective tools to support the mental health of parents following a loss. Together, we will continue to improve the lives of all those affected by miscarriage."

Professor Alex Heazell is Director of Tommy's Maternal and Fetal Health Research Centre.

We're focused on having the biggest impact possible for families who experience pregnancy complications and stillbirth, and as a team we've made important progress this year. Our Rainbow Clinic, which has looked after over 1,200 families since it opened in 2013, has provided a model that is being rolled out in maternity units across the UK, meaning more families will have the best support in pregnancy after stillbirth. We're learning more about how inflammation plays a role in placental problems, which could lead to treatments to prevent it. We've developed new cuttingedge digital techniques to help us find the causes of stillbirth, which will give more parents the answers they need as to why their baby died. With your support, we can keep developing new tests and treatments to stop the heartbreak of baby loss for all families."

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Professor Basky Thilaganathan is Director of Tommy's National Centre for Maternity Improvement, in partnership with the Royal College of Obstetricians and Gynaecologists, and the Royal College of Midwives.

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Over the last year, we've made huge strides in the development and roll out of the Tommy's Pathway tool. Feedback from the early adopter sites has been hugely positive and has helped us improve the implementation process for future locations. We know there are wide variations in the rates of stillbirth and premature birth throughout the UK due to differences in the way that clinical guidelines are followed locally, and we know these variations only serve to increase health inequities. Together, we will ensure that every woman and birthing person gets the right care at the right time, no matter where they live. Professor Lucilla Poston is the Research Lead for King's Health Partners' Institute of Women and Children's Health, as well as Tommy's Chair of Maternal and Fetal Health from 1995 to 2023.

Understanding how lifestyle and maternal health has an impact on pregnancy and baby in the long term is vital to ensure we give all babies the best chance of a healthy birth and life. My work as Tommy's Chair has enabled me to find answers to some of these pressing questions, and also to support and train the next generation of maternal and fetal health researchers. Skills in understanding and managing big data are crucial if we are to continue finding answers to stop the heartbreak of baby loss.

"

Our research locations and clinics

At Tommy's, we fund research that makes a difference. Across 3 national research centres, our scientists are finding the reasons for miscarriage, stillbirth and pregnancy complications, and working to ensure that every pregnant woman and birthing person receives the right care at the right time. We are the largest charity funder of pregnancy and maternal health research in the UK.

Our researchers are leading innovations in basic science, translational and clinical research, and implementation science, and we're proud to fund over £2million of research every year. Thanks to your support, we can find the answers, develop new tests and treatments, and influence national guidelines and health policy to improve care and support for everyone experiencing pregnancy loss.



Hannah

here in my arms."

Health Research Centre

Centre lead: Professor Alex Heazell

What they do: Research into stillbirth, the placenta and fetal growth restriction. The team works to find ways to identify which pregnancies are at risk and improve antenatal care.

Where they're based: St Mary's Hospital, Manchester

The Centre's clinics, in partnership with the NHS:

- Manchester Placenta Clinic
- The Rainbow Clinic
- Preterm Labour Clinic
- The Lupus in Pregnancy Clinic (LiPS)
- The Diabetes Clinic (VELOCITY)
- The Manchester Antenatal Vascular Service (MAViS)
- The START Clinic

Tommy's National Centre for Miscarriage Research

Centre lead: Professor Arri Coomarasamy

What they do: Research into miscarriage, searching for why it happens and creating tests and treatments to find answers.

Where they're based: University of Birmingham, University of Warwick and Imperial College London.

The Centre works in partnership with NHS clinics at:

- Birmingham Women's Hospital
- University Hospital Coventry and Warwickshire
- St Mary's Hospital London
- Queen Charlotte's and Chelsea Hospital London

Together, we can train the world-leading researchers of tomorrow – how we're supporting early career researchers in maternal and fetal health



We support 27 early career researchers across our research centres. They are the next generation helping to end the heartbreak of baby loss.

"The disparities in maternal deaths, neonatal deaths and stillbirths for women from minoritised ethnic groups and those from socially deprived areas in the UK urgently need addressing. Improving our understanding of where inequalities exist in maternity care, and hearing from the women, birthing people and families accessing our services is vital to improve maternal and neonatal outcomes, and maternity care experiences. Without the funding from Tommy's this work would not be possible and I am so grateful for the support I have received. Midwiferyled research is still an emerging field compared with obstetric studies, so I feel very fortunate to be able to develop my career in this area."

"We know early pregnancy loss can have a huge impact on mental health, but there's no clear guidance on supporting women, birthing people and their partners through this difficult event. My research aims to bridge the gap by providing innovative and accessible treatment to parents experiencing pregnancy loss to hopefully reduce mental health problems. Without the work that Tommy's does in raising awareness of the psychological burden of miscarriage, as well as their funding for the project, we wouldn't be able to provide vital care and support to families when they need it most."

"Right now, our tools to identify risk of preterm birth are limited to women and birthing people with symptoms, yet we know that many experience early labour without any prior risk factors at all. My research is investigating risk and predictor differences across socioeconomic and ethnic groups, along with geographical factors such as air pollution, across England. We hope to develop a new risk prediction model that means we can offer the best care earlier in pregnancy. The support from Tommy's means I can translate my research into real-world change."



Charlie Barber is a research midwife and Saving Babies' Lives specialist midwife. She works at St Mary's Hospital in Manchester at the Tommy's Maternal and Fetal Health Research Centre in a dual role, implementing the Saving Babies' Lives Care Bundle at the hospital, and working on midwifery-led research projects focused on inequalities in maternity care.



Dr Bara'a Elhag is in the first year of specialist training in Obstetrics and Gynaecology, previously working as a clinical research fellow at Imperial College London based at Queen Charlotte's and Chelsea Hospital at the Tommy's National Centre for Miscarriage Research. Her work is focused on improving mental health following early pregnancy loss.



Ruta Margelyte is a postgraduate researcher in Translational Health Sciences at Bristol Medical School, and part of the data science team at the Tommy's National Centre for Maternity Improvement. Her PhD project is focused on predicting pregnancy outcomes such as preterm birth using novel approaches like machine learning on large national datasets.

Together, we can understand why – developing a bespoke test for recurrent miscarriage

Our researchers have discovered that defects in the lining of the womb can make recurrent miscarriage more likely and have developed a test that can be used before pregnancy to work out how likely it is that miscarriage will happen again.

The digital endometrial function test

Around 1 in 100 pregnant women and birthing people experience the heartbreak of recurrent miscarriage, defined as having 3 or more miscarriages in a row. Sometimes, recurrent miscarriage can happen because of problems with the lining of the womb – the endometrium – which prevent it from supporting the growth of a healthy embryo.

The team at Tommy's National Centre for Miscarriage Research has identified several markers that can indicate when things aren't quite right in the womb and have used these to develop a novel clinical test, called the digital endometrial function test, which assesses the state of the womb lining before pregnancy.





The team also found that sitagliptin – a diabetes drug that may help to reduce the risk of miscarriage – can improve the condition of womb lining samples in the lab.



What's next?

In July 2022, our researchers began trialling their novel test at the Implantation Clinic, a dedicated research clinic at the University Hospitals Coventry and Warwickshire NHS Trust, where it is already helping families understand more about why they have experienced miscarriage. In the future, our researchers want to carry

out a larger clinical trial to find out whether sitagliptin treatment before pregnancy can prevent miscarriage in people with an irregular test result.



Robyn and Alex's story



Robyn and husband Alex, from Cornwall, decided to try for a baby nearly 8 years ago. After a year of trying without getting pregnant, they went to their doctor for further support and following some tests, Robyn found out she had Polycystic

Ovary Syndrome (PCOS) but was not offered any treatment to help. "It was a really rough road with the doctors and I just felt like no one was listening." said Robyn.

4 years later, Robyn and Alex changed GP and got a referral to a specialist fertility clinic at the Royal Cornwall Hospital. Robyn was prescribed metformin and clomiphene, and fell pregnant for the first time in 2020. Sadly, this pregnancy ended in miscarriage.

"It was a heartbreaking experience, and really bittersweet because on one side I was over the moon I was able to get pregnant, but also utterly devastated that the baby couldn't stay."

Over the next 2 years, Robyn went through more rounds of different medication for PCOS but sadly had a further 3 miscarriages. "I'd encourage anyone experiencing loss to know that you don't have to go through it alone, there are people like Tommy's out there to support you."

After her fourth miscarriage, the midwives at her early pregnancy unit (EPU) asked if she had heard of the studies happening in Warwick and Coventry. "I hadn't heard of Tommy's or the research going on in Coventry, so they gave me the details and I contacted Professor Brosen's clinic to get an appointment."

Robyn travelled up from Cornwall to Coventry to have a biopsy of her womb taken, and it showed an imbalance in the amounts of cells that are important for successful implantation of an embryo. The team at Warwick prescribed her sitagliptin and she and Alex are now expecting a baby early next year. "From the nurses and midwives to Professor Brosen, everyone has just been brilliant, so kind and down to earth, which has made the whole experience so much better."

"I do think the reason I've kept this baby so long is because of the test and the treatment I've received from the team at Coventry."

> By building on an entirely new understanding of the process of embryo implantation, we have developed the first bespoke test that looks at the womb to find reasons for miscarriage."

> > **Professor Jan Brosens** Scientific Director at Tommy's National Centre for Miscarriage Research

Together, we can transform care after loss – the National Rainbow Clinic Study

For parents whose babies have been stillborn or died shortly after birth, their next pregnancy can be very daunting. We've developed a model of care that provides extra reassurance and support in pregnancy after loss.

Tommy's Rainbow Clinic

The Tommy's Rainbow Clinic at St Mary's Hospital in Manchester cares for families who have suffered a stillbirth or neonatal death and require extra support in their next pregnancy. It's led by Professor Alex Heazell, Director of Tommy's Maternal and Fetal Health Research Centre in Manchester.

The Rainbow Clinic model of care is now being rolled out to other maternity units in the UK and there's even a Rainbow Clinic at Mount Sinai Hospital in New York, which was set up with support from Professor Heazell.

The National Rainbow Clinic Study

Our researchers are collecting data from Rainbow Clinics nationwide to find out whether this model of care improves both the chances of giving birth to a healthy baby, and the wellbeing of parents who are going through pregnancy after loss. Over 1,150 women are currently participating in the study. We hope it will demonstrate the positive impact of these clinics, encouraging other maternity units to set them up and allowing more families who are pregnant again after loss to access the specialist care that a Rainbow Clinic provides.

After losing our first daughter, we jumped at the chance to attend the Rainbow Clinic in Manchester. It was fantastic on so many levels – the expertise of the team provided reassurance that everything was progressing healthily with our second daughter and knowing we were taking part in research gave a sense of giving something back in our own small way." **2,866 babies** were stillborn in the UK in 2021



Using data for good

Our researchers are also using data from the Rainbow Clinics to find out more about stillbirth. So far, they have found that there is a link between the cause of a previous stillbirth and the likelihood of having complications in another pregnancy. They're now working out if ultrasound scans taken at 23 weeks can be used to predict which babies will need to be delivered early or will be smaller than expected at birth.



Stephen and Yue, who attended the clinic after losing their first daughter due to a rare complication affecting blood supply from placenta to baby in late pregnancy.

Together, we can find ways of preventing stillbirth – discovering tests and treatments

At the Tommy's Maternal and Fetal Health Research Centre in Manchester, we're carrying out vital research into the causes of stillbirth to find new ways to prevent it.

Our pathway to preventing stillbirth

1. Researching the causes



Our researchers are carrying out several projects that are exploring the causes of stillbirth. By doing this, they're helping more families to find out why their baby died while also paving the way for the development of new treatments.

In one project, our team are using cutting-edge digital techniques to study the placenta after stillbirth. Usually, pathologists look at the placenta under a microscope, but this approach may overlook crucial changes. By using computer software to analyse the microscopic images, patterns can emerge that are not obvious to the human eye. This innovative technique could offer grieving parents more answers after a stillbirth.

2. Finding new treatments



At the moment, there are limited treatment options for placenta problems that can lead to stillbirth. We want to change this. The team is carrying out a range of projects aimed at finding new ways of treating people at risk of stillbirth.

We know that inflammation can damage the placenta and cause stillbirth. In one project, our researchers are testing several anti-inflammatory drugs – known as NLRP3 inflammasome inhibitors – to see if these can reduce inflammation and improve how well the placenta is working in the lab. The team hope to find a potential treatment to prevent stillbirth that would next be tested in pregnant women.

3. Improving care



We want all pregnant women and birthing people to receive the best possible care. To help make this a reality, our team are currently researching different methods to improve care and prevent stillbirth.

Babies in the womb have their heart rate checked occasionally to see if everything is okay, usually at each antenatal appointment from 18

weeks onwards. However, these tests only give a brief snapshot of the baby's health. In one project, our researchers are developing a special device – called the FeHeMo vest – that can be worn by pregnant women to track their baby's heart rate and movements over a longer period of time, helping healthcare providers recognise when a baby is struggling in the womb and giving them an earlier opportunity to intervene.

Together, we can tackle inequity and improve care for all – Rolling out the Tommy's Pathway tool

Our team at Tommy's National Centre for Maternity Improvement have developed an online medical tool that gives healthcare professionals the most up to date information so that they can provide personalised care to every woman and birthing person during pregnancy.

A tool for change

In the UK, 2,866 babies were stillborn in 2021, and more than 53,000 were born prematurely. The Tommy's Pathway is an online medical tool that can help healthcare providers identify each person's chance of preterm birth or of developing problems with the placenta that may lead to stillbirth. It can help make sure all pregnant women and birthing people get the best evidence-based care at the right time. The tool has been trialled at 4 early adopter sites, with women and birthing people providing comments and feedback through the process.

In England and Wales, Black babies are more likely than other groups to be born prematurely. England and Wales national average 7.6%

over 70%

of users surveyed said the information on the Tommy's Pathway web app made them feel reassured.



said it helped them raise concerns with their midwife or doctor.

personalised

are

"Sometimes you just hear some big words that you can't understand. But when you log into the pathway as a patient, it really summarises it properly and it's easy to understand what's happening and what's being said."

What's next?

Thanks to an award of £1.8 million from the National Institute for Health and Care Research, our team will next carry out a 3-year trial of the Tommy's Pathway in 26 NHS hospitals. This trial, which is due to start in 2023, is a huge stepping stone towards offering more personalised care that can save babies' lives. We spoke to Siobhán Gillespie (Project Midwife for Implementation at Tommy's National Centre for Maternity Improvement) and Dr Jenny Carter (Research Fellow at Tommy's National Centre for Maternity Improvement) to find out more about their hopes for the Tommy's Pathway.





Siobhán Gillespie

Dr Jenny Carter

What do you enjoy most about working at Tommy's National Centre for Maternity Improvement?

Jenny: I'm really proud to be part of something so important – something that has the potential to really improve maternity care. It's also brilliant to work with a huge team of fantastic people from different disciplines who are at the top of their fields.

What are your hopes for the Tommy's Pathway and how do you think it will transform maternity care?

- Jenny: Ultimately, we want to reduce stillbirth and preterm birth rates. We know it can be challenging for clinicians on the frontline to keep on top of constantly evolving guidelines, so the Tommy's Pathway will make it easier for doctors and midwives to provide the right care consistently across different hospitals.
- Siobhán: We also hope to add more elements to the Tommy's Pathway. For example, we could include postnatal assessments looking at mental health and could signpost women who need support. We're only at the beginning of what the pathway can do!

What feedback did you get from healthcare professionals who used the Tommy's Pathway at the early adopter sites?

Siobhán: There were initial concerns that it might add to teams' workloads, but we've been able to show that we are actually reducing workload by decreasing the number of women who are inappropriately categorised as high risk. For example, we've had positive feedback from sonographers because there has been a huge reduction in the need for growth scans. The fact that the midwives have taken the time to explore the tool and have embraced it wholeheartedly, even while being extremely busy, has been mind-blowing.

What does this mean for the wider trial?

Jenny: The feedback we've received has been so valuable because we can start to make changes to improve the pathway. We now know what hospitals need to do before they start using the Tommy's Pathway, meaning it should be easier to introduce the pathway to other hospitals.

It's brilliant to work on something that could potentially have a huge impact – at our early adopter sites, we're already starting to see things change and to see better options for women. My dream is that the Tommy's Pathway will improve outcomes, reducing the number of stillbirths and preterm births and allowing pregnant women and birthing people to have their voices heard."

Siobhán

Together, we can help to give more families the chance to take home a healthy baby

Meet Jennifer, Adam and Charlotte

Jennifer and Adam started trying for a baby soon after getting married in August 2019. They got pregnant very quickly but the following month Jennifer noticed some bleeding. She went to get it checked out and a scan showed a suspected ectopic pregnancy. "It was a massive blow. It was a scary time, but initially the nurse laughed at me for being anxious." When Jennifer fell pregnant again a few months later, an early scan showed their baby's heartbeat but she began to bleed a few weeks later while on holiday with family.

"I called my EPU, and they tried to tell me it was normal and everything was fine, but I knew something was wrong."

After returning from holiday the next day, a scan at hospital showed they'd sadly miscarried. Because of COVID-19, Adam wasn't allowed to attend the scan until they couldn't find the heartbeat. "It was so tough because this was the first time he'd been allowed into a scan, and it was to see that our baby had died." Jennifer was sent home and unfortunately miscarried fully in her bathroom, which was very traumatic.

She and Adam reached out to see if they could get a referral for further support but were told she had to have 3 miscarriages before she was entitled to further help. "All the way through this, our treatment felt very clinical." she said. "There was no support and I felt like a nuisance asking for help."

They got pregnant a third time and tried to stay optimistic, but following a scan they were told it was a suspected molar pregnancy, which required surgery. "We felt very scared, because it wasn't just the trauma of pregnancy loss but also the impact on my health while we were trying." After the third loss, Jennifer was referred to the Tommy's recurrent miscarriage clinic at Birmingham. "It was a whole different world as soon as I got to Tommy's – the midwives and doctors really are angels on earth."



"It was amazing to finally speak to people who really cared, it was so personal. Our 4th pregnancy ended very early, but the difference in care I received at Tommy's was incredible – they were so kind and offered so much support."

A few months later Jennifer fell pregnant for the fifth time, and Tommy's midwives Oonagh and Rachael looked after her throughout this pregnancy at the clinic. They were on hand at all times to help reassure her with further scans and answer her questions. As part of their treatment at the clinic, Adam took part in the pAToMiUM trial, which was exploring how to improve sperm DNA quality. Jennifer took progesterone throughout this pregnancy,

which she firmly believes helped things progress to term.

Jennifer and Adam welcomed baby Charlotte in April 2023.



Meet Uzma, Khalid, Muhammad Tayyab and Noor Fatima

Uzma and Khalid first fell pregnant in 2014, and everything seemed to be progressing normally. At just over 36 weeks, Uzma had her routine appointment with the midwife at North Manchester General Hospital but sadly they couldn't find a heartbeat. Further scans confirmed that their son, Ahmed, had died. "I gave birth to Ahmed at 37 weeks, 2 weeks away from my due date. All I ever wanted was to have a baby and losing him sent me into a deep depression." Tests showed that baby Ahmed had been growing more slowly than he should have been, but the placenta postmortem didn't show any significant problems.

2 years later in 2016, Uzma fell pregnant again. Due to the trauma of her stillbirth, she didn't want to return to North Manchester General so her healthcare team moved her to St Mary's Hospital in Manchester. At her first appointment they told her about the Rainbow Clinic, and throughout her pregnancy Uzma was treated by Professor Alex Heazell.

"At that point, I would have done anything and everything to have a healthy baby, so my care was moved to Tommy's, and I can't express how glad I am that I was seen there."

She experienced various complications during her pregnancy, including raised antibodies which increased her risk of blood clots. "I went on heparin injections from 3 months, and because in my previous pregnancy the baby didn't grow as expected, they also put me on aspirin." She was monitored very closely by Professor Alex and the team, being told she could contact the clinic at any time if she was feeling anxious about any symptoms.

"In pregnancy after loss, it's sometimes difficult to think rationally, but they were always there to tell me my feelings were valid, and I didn't need to feel ashamed." "When you talk about someone going the extra mile for you, the midwives and doctors at the Rainbow Clinic ran a marathon for us."



"They made me feel supported, and that I was not being a nuisance, and that my concerns were genuine." Uzma was booked in for an induction at 37 weeks, and following a complicated labour, Uzma welcomed baby Muhammad Tayyab.

Uzma and Khalid always wanted more children, but unfortunately subsequently experienced 2 miscarriages and a ruptured ectopic pregnancy. Because of this, when her period was late one month in 2022, she was initially scared it was another ectopic pregnancy. "When the pregnancy test came back positive, I was very happy but also very scared that something might go wrong, because it had been 7 years since I had Muhammad Tayyab"

She contacted St Mary's and, after a scan with Professor Alex to confirm that it wasn't an ectopic pregnancy, remained under the care of the Rainbow Clinic for the rest of her pregnancy. Rainbow midwife Emilie was on hand to support whenever Uzma needed, speaking with her between hospital visits, supporting her with worries about work, and helping to refer her for further support with her mental health. Baby Noor Fatima was born in February 2023.

"For me, taking part in research through the Rainbow Clinic really improved the quality of treatment I received, and without their support I don't know where we would be".

Together, we can form effective partnerships to drive change

In August 2021, Sands and Tommy's joined forces to create our Joint Policy Unit, focused on using evidence to identify the key changes needed to save babies' lives, reduce inequities and improve outcomes.

In spring 2022, Head of the Unit Robert Wilson set out the strategic objectives:

- To make 'saving babies lives' and reducing inequalities a national policy priority
- To ensure everyone can benefit from best-practice care throughout pregnancy and the neonatal period
- To secure policy change so that new research and evidence lead to improvements in care

Sands & Tommy's Policy Unit

Working together to save babies' lives

A shared voice to guide policy

Safety and equal access to services have been brought into sharp focus this year. While the Ockenden review and East Kent reports outlined serious failings within individual services, various national reports have highlighted the challenges faced by services across the UK. Data from various sources including the Office of National Statistics (ONS) show some communities continue to experience much poorer outcomes than others in pregnancy and baby loss. We recognised that in order to affect change, we needed to pull together insight from a range of different sources to make clear, data-driven recommendations, and build consensus on the key policy changes needed to save more babies' lives.

The inaugural Saving Babies' Lives Progress Report, launched in May 2023, laid out our ambitions to reduce loss throughout pregnancy and the neonatal period. This is a vital tool that will enable us to hold the government to account on efforts to reduce baby loss and improve outcomes throughout the pregnancy journey.



stillbirths per 1000

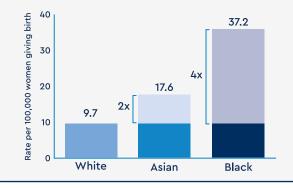
2.7

in 10% least deprived areas in England Driven by the experiences of the families who are reflected in our report, we are determined to make sure pregnancy loss and baby death stay high on the political agenda. That they are treated as the urgent priorities we know they deserve to be. Our report provides a clear view of where we are now, and where action is required to make progress. With it comes a commitment to work constructively with government and policymakers to secure change that will save more babies' lives.

Robert Wilson Head of the Joint Policy Unit

In the UK:

Black mothers are 4 times more likely to die while giving birth than White mothers, while Asian mothers are 2 times more likely.



Tackling disparities in maternity care

As part of our work with Sands, we co-lead the Maternity Consortium for the Health & Wellbeing Alliance – a partnership between sector representatives, patient voice groups (including FiveXMore, the Muslim Women's Network UK and LGBT Mummies), the NHS and government agencies, with a shared goal to reduce health inequalities for families from preconception through to the first year of a baby's life. In 2022, the Minister for Women's Health, Maria Caulfield, established the Maternity Disparities Taskforce to tackle disparities in maternity care experienced by women from minoritised ethnic groups and those living in deprived areas. The Maternity Consortium are members of the taskforce and bring the voices of those with lived experience to the group.

Our projects

The Consortium leads projects focused on improving health outcomes for children and families from minoritised ethnic communities and those living in areas of high deprivation, ensuring equitable access to specialist perinatal and maternal mental health services, and addressing inequity in neonatal care.

Through webinars, events and engagement with service users and healthcare professionals, we're making progress to equip our health service providers with the tools to support those who need it most.

From 2022–23, the Consortium led and delivered 3 projects:

- Starting Well: We hosted 2 webinars and developed 2 written case studies sharing learning, good practice and lived experience from the Starting Well projects – improving health outcomes for children and families from minoritised ethnic communities or those living in areas of high deprivation.
- 2. Ensuring equitable access to specialist perinatal and maternal mental health services: We hosted 3 events tailored to service providers' needs, supporting education, networking and improved practice in specialist mental health services.
- **3. Addressing inequity in neonatal care:** After carrying out a survey and engagement sessions with healthcare professionals and families, and undertaking an extensive literature review, we partnered with Bliss, a UK charity championing support and care for premature and sick babies, and created a 90-minute webinar for healthcare professionals to support education and improve practice to address inequalities in neonatal care.

Making sure improvements in miscarriage care become a national priority

The Miscarriage Matters Lancet series was launched in 2021 and laid bare the devastating impact of miscarriage. In July 2022 the Women's Health Strategy for England was released, mentioning the findings of the Lancet and renewing the Government's commitment to exploring further measures to improve miscarriage care through the planned Pregnancy Loss Review. The review, which was published in Summer 2023, looks at care for families who lose a baby before 24 weeks of pregnancy, and makes recommendations to improve care and services. Together with our National Centre for Miscarriage Research and Ambassador Myleene Klass, we have been working with key stakeholders, including meeting with the Pregnancy Loss Review chairs, to share best-practice and recommendations to improve care for all. We are committed to continue driving for change until all women and birthing people receive care and support after their first miscarriage, not just after 3.



Kath Abrahams, Tommy's Chief Executive, speaking about the Lancet policy recommendations as part of the documentary 'Miscarriage: The Hidden Loss', broadcast on ITV Cymru Wales in October 2022.

Together, we can provide the best support and information to families, wherever they are on their pregnancy journey

The Miscarriage Support Tool

Developed by our National Centre for Miscarriage Research, and using an algorithm drawing on data from 1,800 women who have participated in miscarriage research studies, this tool has been used by specialists at our recurrent miscarriage clinics to help women and birthing people find out their chance of a successful next pregnancy. For the first time, we've made this tool available for anyone to access with a user-friendly online calculator – launched in November 2022.

By entering personal and medical information, as well as pregnancy history, the tool uses an algorithm to calculate someone's chance of a successful pregnancy. It also provides personalised advice and information on ways users can reduce risk, as well as detailed information on the tests and treatments that should be available to them.

For those who have a higher risk of another miscarriage (less than a 40% chance of a next successful pregnancy), we have been offering a 1:1 call with a Tommy's Midwife to discuss their results and to get advice or a referral to specialist support if this is needed. This is part of our commitment to tackling inequities in miscarriage care.

We're very grateful for support from the Department for Culture, Media and Sport's Tampon Tax Fund, which made this project possible.

Many people who have experienced recurrent miscarriages can feel so hopeless that they stop trying. I hope this tool will encourage people to feel more in control as they plan their next pregnancy. Everybody has a different story and circumstances, but it's very difficult to get personalised information without a referral to a specialist centre like ours; I'm very confident the Miscarriage Support Tool is good at predicting real outcomes for real people because that's exactly what it's based on."

Professor Siobhan Quenby Deputy Director of our National Centre for Miscarriage Research



Providing ways to help women and birthing people access the right care

Our website, midwife support line and the Miscarriage Support Tool all provide women and birthing people with information. An important next step is how that information can then be used to improve their care and make their pregnancy safer.

Early pregnancy bleeding and progesterone

One example of how we're providing practical support is through our progesterone resources. In 2021, NICE updated their guideline on care after miscarriage to reflect the evidence of our PRISM trial, recommending that progesterone be offered to women who had 1 or more miscarriages and were bleeding in early pregnancy. However, accessing this treatment is currently dependent on a referral from GPs, which requires those in primary care settings having up to date knowledge and information.

The anecdotal feedback we were getting from our community showed unfortunately that this was often not the case, with women and partners not getting enough or the correct information, support or care when presenting with bleeding in early pregnancy after a previous miscarriage.

That's why we created the early pregnancy bleeding and progesterone web page and leaflet – to explain when and how progesterone could make a difference and raise awareness of how people can access this treatment. The leaflet is downloadable so women could bring it to their GPs to support their request for a prescription.

The popularity of this page since we published it is testament to the gap in information on this topic. Almost 25,000 people have viewed the page in the 5 months it's been on our website.



"Thank you. It was because of your leaflet that I was able to get progesterone following a scare in my pregnancy after 2 miscarriages, and this pregnancy led to my daughter."

15 million

people a year accessed our pregnancy information and baby loss support

6,455 1:1 midwife conversations over email or phone

12,500 members of our Facebook support groups

Tommy's signposts people to the right information about progesterone, so they have the support needed when they go and see their doctor. They can say – I've completed this tool through Tommy's, here are the resources and recommendations which are backed up by national guidelines. If the GP wasn't aware of that, they can trust the information they're being presented with which clearly outlines when to give progesterone."

Dr Ria Clarke,

Tommy's Ambassador and obstetrics and gynaecology registrar talks about why the tool is so important

24

Together, we can provide support where the risk is highest

Tommy's Specialist Support Service and Helpline

The Specialist Support Service is a new pregnancy helpline that is specifically aimed and marketed at Black and Black Mixed Heritage women and birthing people, who have been shown to be at higher risk of pregnancy loss, including a 40% increased risk of miscarriage.

Originally set up as part of the Miscarriage Support Tool project, the helpline for Black and Black Mixed-Heritage women proved so successful it has now evolved into a standalone service – and we are committed to funding it indefinitely.

What we know so far

- The session lengths average about 1.5 hours per user.
- Users told us how much they valued having unhurried conversations, being able to ask a variety of questions and explore concerns beyond those they had initially called for.
- The topics discussed varied and covered the entire pregnancy journey they were not just focused on pregnancy or baby loss.
- A central theme emerged of women and birthing people not feeling safe, knowing that as Black/Black Mixed-Heritage women and birthing people they were 4 times more likely to face adverse outcomes and how frightening they found this. They appreciated this being acknowledged and understood by the midwives on the call and having an honest and frank conversation about how they can navigate this.
- Areas of advice included exploring care pathways, signposting to specialists or services, and giving support on how to ask questions and who to ask those questions to.
- 100% of users who gave feedback said they would recommend it to others.

We're delighted to be continuing to run the Specialist Support Service as a standalone service, helping to make pregnancy and birth safer for those most at risk of pregnancy complications and baby loss. Support Service Are you a Black or Black Mixed-Heritage Woman living in the UK? Looking for support with anything pregnancy related?

Tommy's

Get 1:1 support from a Tommy's midwife.

To help even more women and birthing people find out about and access the support service, we created cards for midwives to easily share with patients at appointments.

Are you Black or Black Mixed-Heritage?

Tommy's

Tommy's midwives



Women and birthing people who contact the service have 1:1 support from one of our Tommy's midwives during their call. They can also choose to speak to the same midwife again in any future contact.

Shamaila's journey with the service

Shamaila requested a callback from the Specialist Support Service after being signposted to us via our friends at MuslimMamas.

She was 38 weeks pregnant with her third baby and had been advised at 37 weeks she would need to be induced after a growth scan identified that her baby was measuring small for gestational age.

Shamaila was very upset by this. She felt she was being forced into something and that her concerns were being

dismissed. Her first baby had been induced at 39 weeks, and she'd had a very traumatic labour and birth, ending in an emergency c-section. She was scared this would happen again and was worried for her and her baby's safety.

She felt she was not being taken seriously as she was a mixed heritage Black woman who wore a hijab and spoke with a non-European accent.

She worked as a research scientist and was able to understand risk and procedures but felt that due to her appearance and race, she was being



dismissed and told to 'just trust the doctor'.

She wanted to feel safe, supported and able to make a choice that was based on her needs rather than what was standard process, which is what she felt was happening.

Following a long conversation with our midwife exploring her options, she set up another appointment with her consultant to discuss her concerns and to ask questions about alternatives. This meeting resulted in a plan of care being agreed. She found that her consultant was more receptive to her questions after support from Tommy's as she felt she knew better how to discuss her care and make informed decisions.

We had a further 5 contacts with Shamaila – always with the same midwife as requested. The calls focused on her mental and emotional wellbeing, how she was feeling and how her care was progressing. The midwife gave Shamaila the time to explore her options, the confidence to ask questions and the knowledge to know what questions to ask.

She gave birth to her baby son at 41 weeks 5 days after going into labour naturally and called to let us know her experience was positive because it was on her terms.

Her contact with us after was a thank you email:

New Message

- 2 ×

From : Shamaila

Subject : Thank you Tommy's

I want to say a big thank you to you for your continuous support and assistance during this tough time... You have provided me with a great deal of knowledge and understanding to deal with that situation. At the end, it helped me tremendously to take the right decisions for myself and for my baby.

You were very committed and dedicated to ring me and to ask me how I was feeling during that time. I can't say enough thanks to you.

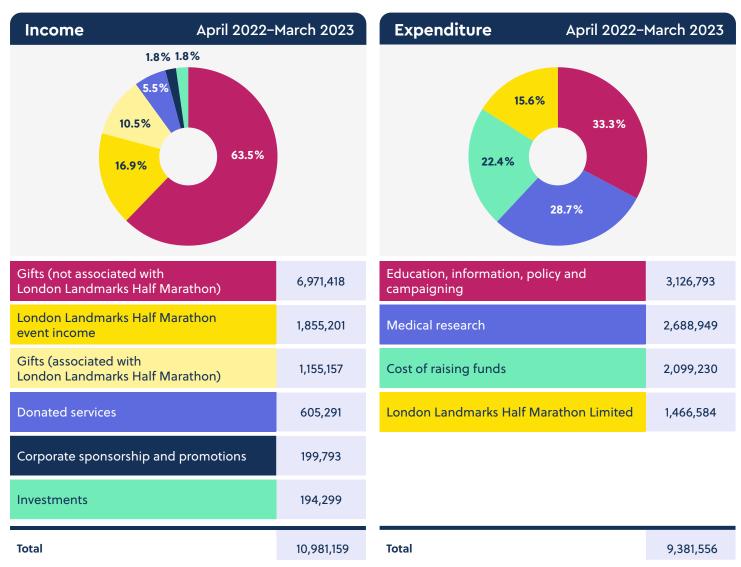


Fundraising

• We invested £2.1m in our fundraising, which brought in £7.2m in donations and corporate sponsorship. The investment also helps us to deliver further income in the years to come.

London Landmarks Half Marathon

• We invested £1.5m in delivering and growing our event business, and raised £1.2m in donations for Tommy's and £1.9m in income from the sale of race places, advertising and merchandise.



Team Tommy's - another incredible year of support

April

We saw the start of mass participation fundraising events for the year with **Team Tommy's** at the **Brighton Marathon** and the **London Marathon**. Collectively **£372,000** was raised through these iconic events with our teams proudly wearing their Tommy's vests.

The fifth edition of the **London Landmarks Half Marathon**, an event organised by Tommy's, took place on 3 April 2022 with over 11,500 runners. Returning to its traditional Spring date following a one-off Summer Special in 2021, the event raised a whopping **£3.02m** for Tommy's

and £7.9m across all 300 charities bringing the grand total raised since the first event to an outstanding £28m.



May

2022

Author and presenter Pippa Vosper hosted a panel discussion with Kath Abrahams, Tommy's Chief Executive, and Professor Siobhan Quenby, Deputy Director of our National Centre for Miscarriage Research. The event was organised at Soho House

by our supporter Chloe Hunter to launch our new giving club **Tommy's Trailblazers**.



Together with WOW World Group (Baby Sensory and Toddler Sense) we held our fourth **Sensathon** in May. The theme was Yee-Ha! and the children had a lot of fun dressing up in cowboy themed costumes to complete their fundraising challenges. We were delighted that over 20,000 children

took part during their usual sensory class, and 3,689 children chose to fundraise and raised an incredible **£481,712**. Yee-Ha! went on to be shortlisted for the Third Sector Fundraising Campaign of the Year Award.

June

2022

We held an **online 'Research in Focus' event** to update supporters on progress since the groundbreaking 'Miscarriage Matters' series in The Lancet in 2021. Tommy's Ambassador Myleene Klass was joined by lead researchers Professor Arri Coomarasamy and Professor Siobhan Quenby from our National Centre for Miscarriage Research and Kath Abrahams to talk about the scale of the issue and the steps we are taking to improve care and support for families.

August

2022

2022

We held our first **Rainbow Challenge** in 2022, where parents were asked to fundraise with their little ones by doing a challenge with the number 7 in it, to represent the 7 colours of the rainbow.



We also launched our first rainbow merchandise with **'Believe in Rainbows'** muslins and t-shirts, featuring beautiful designs from Sketchy Muma, our supporter Anna Lewis.



Lauren's story:

After experiencing 2 miscarriages, Lauren sought out every piece of information she could find, which led her to Tommy's and our research.

"I struggled hugely with my mental health after my losses, but learning more about the research that Tommy's does gave me hope. I had a London Marathon place coming up and I knew I wanted to run for Tommy's. I cried most of the way around the course but felt strong and hopeful. Little did I know that not only was I carrying 2 babies in my heart, but I was also carrying our rainbow".

September

2022

Tommy's got a step closer to transforming miscarriage care across the UK - including better screening and support for mental health - thanks to new funding from the Peter Sowerby Foundation to develop, test and introduce our proposed 'Graded Model of Care'.

Team Tommy's was out in force in North East England taking on the world's largest half marathon, the Great North Run. Our fantastic team of 280 runners raised an impressive £115,000.



The wonderful team at the Tommy's Centre for Maternal and Fetal Health Research in Manchester organised and held their second Rainbow Race, bringing together families supported and cared for at the Rainbow clinic – which meant a gathering of lots of rainbow babies. It was such a special day full of gratitude for the work that is being done at the centre and raised a brilliant £7.500.

A team of 20 from our amazing partner Teneo took on the Lake District 10 Peaks Trek. This incredible challenge saw the team cover 17 miles across 10 iconic Lakeland peaks, collectively the team raised over £20,000.



Tommy's Midwifery Manager Amina Hatia was joined by miscarriage leave campaigner Keeley Lengthorn and representatives from over 20 companies, including the Chartered Institute of Personnel and Development, for a panel discussion on supporting employees through complex pregnancy journeys and baby loss. This is part of our Pregnancy and Parenting at Work programme.

October

The Royal Parks Half Marathon took place, poignantly at the start of **Baby** Loss Awareness Week.

It was a reflective and special day for many of Team Tommv's and raised a fantastic £68.000 towards our vital work.



2022

Together with babyballet we held our third Danceathon. 2,429 tiny dancers took part wearing their most colourful clothes and found all the colours of the rainbow, raising an incredible

£319,319. This year our babyballet partnership reached the huge milestone of £1m raised for Tommy's.



Poundland[®]

We were thrilled to be recognised at the Corporate Engagement Awards for our long-standing partnerships with the Poundland Foundation, Make-A-Wish and Whizz Kidz, Our collaborative partnership was awarded Gold for 'Best alignment of brand values during a CSR programme' and highly commended in the 'Most Innovative Collaboration' category.

"The Poundland Foundation is proud of our long-standing, innovative partnership with Tommy's, Make-a-Wish and Whizz Kids and everything we are achieving together, to support families and change lives across the UK". Lucy Ruff

Charity Foundation Manager

PLUM & ASHBY

For the third year running, we proudly partnered with Plum & Ashby during Baby Loss Awareness Week.

Alongside their beautiful Wave of Light candle, which raised an incredible £45.000 for Tommv's, we worked together to create a social media film featuring a group of women sharing their different experiences with loss and taking part in the awareness week. The film received over 1m views on Instagram.

"Since 2020 we have been creating the official Tommy's candle for The Wave of Light campaign.

We are proud to support Tommy's work by donating 100% of our profits from the sales of our special candle.

Baby loss and the work that Tommy's do is so incredibly important to us and we are pleased that we can play a part in this wonderful cause."

Vicky White Co-Founder of Plum & Ashby

November

2022

Tommy's 25

Our **Tommy's 25 dinner** was well attended by members of our giving club and major donors. The event was co-sponsored generously by supporter Steve Edge and corporate partner Tufton. BBC journalist Tulip Mazumdar kindly shared her story and Professor Siobhan Quenby of our Centre for Miscarriage Research spoke about what is being done to avoid such heartache for families.

The Sir Jules Thorn Charitable Trust generously supported our National Centre for Maternity Improvement, helping families across the UK to receive improved care during pregnancy.

December

We launched **Festive Tea for Tommy's**, our first community fundraising activity of its kind. 248 supporters hosted festive tea parties with their

best bakes and raised over £9.158.

2022

The **Tommy's Children's Carols** event was held at St Mary Abbot's Church in Kensington and raised **£21,283**. This was organised by our ambassador, Marina Fogle, and was "a carol service full of life, laughter, song and joy, a service where each reading is appropriate for children, and each carol is one they can sing their hearts out to".

Our **Big Give Christmas Challenge** – **Research, Support & Change** was a huge success, raising over **£116,346**. To highlight the devastating impact of baby loss and the lifesaving difference research can make, Hannah and Darren from Manchester shared their story for this year's campaign. With huge thanks to all our supporters, the Julia and Hans Rausing Trust and to our corporate partner Tufton, their friends and clients for their massive contribution in getting behind this campaign.



Team Tommy's

Tommy's

We were delighted to receive funding from the **Department of Health and Social Care's VCSE Health and Wellbeing Fund** to develop our current **Pregnancy and Parenting at Work employer training programme** into a scheme suitable for smaller companies. Thanks to this grant, we are aiming to support more than 1,000 small and medium sized enterprises with free training on how to support employees through pregnancy and complications.

BiaGiv

We launched our new partnership with **The Positive Birth Company**, raising over **£10,000** in just a few months.

January

2023

2023

We received a grant from **The Betty Messenger Charitable Foundation** as it closed its operations. The Betty Messenger Charitable Foundation has been a generous supporter to Tommy's for many years, and we are extremely grateful that the Trustees continued the Foundation's legacy of saving babies' lives.

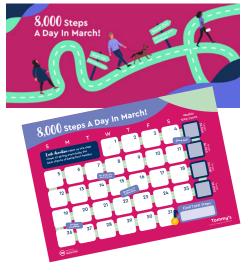


March

We were incredibly grateful to receive funding from the Medical Research Council's Early Career Researchers Fund. This government funding supported many of our wonderful researchers, technicians and PhD students. Thanks to this grant, we have been able to nurture people's talent during the vital first stages of their careers as they improve our understanding of pregnancy complications and baby loss.



We held our first **Facebook Challenge** in March 2023 – **8,000 Steps a Day**. It was very successful raising **£114,000** and building an amazing community who shared stories, supported each other and celebrated success together too with their physical and fundraising milestones.



In the second year of our **#WeSeeAMum campaign** we were thrilled to launch a new partnership with Bloom & Wild. Bloom & Wild designed the special Hope bouquet in support of Tommy's to help their customers to care wildly for someone special over Mother's Day, raising over **£10,000**.



We also launched our first range of **Mother's Day cards** as part of the campaign, including special cards for mums who have experienced pregnancy and baby loss.



Thank you

We know that every penny counts when you're saving babies' lives. Thanks to generous supporters like you, we're able to continue finding research breakthroughs, support families throughout their pregnancy journeys and make sure everyone who experiences pregnancy complications and baby loss is cared for. We are eternally grateful for the support of our Founders: The Hon Mrs Lucy Nelson, Dr Ian Fergusson and Dr Anthony Kenney and our Patrons: Ron Dennis CBE and Sally Tennant OBE. Their vision and commitment have enabled us to become the charity we are today.

Our heartfelt thanks go to everyone who has helped Tommy's raise funds, including:

Companies:

babyballet, Bloom & Wild, Careys Foundation, Hologic, MAM UK Ltd, Never Fully Dressed, The Poundland Foundation and Poundland's colleagues, customers and suppliers, Plum & Ashby in collaboration with Elle Wright of Feathering the Empty Nest, Teneo, TFP Fertility UK, The Positive Birth Company, Thrive Tribe, Together Socks, Tufton and WOW World Group.

Members of Pregnancy and Parenting at Work

Arqiva, Birmingham Women's and Children's NHS Trust, Bonnier Books, Bristol Myers Squibb, BUPA, Daiwa Capital Markets, Freeths LLP, Girl Guiding, Humber Teaching NHS Trust, Lime FMS, Ramblers, RCOG, Santander, SMS Plc, South Staffordshire College, Teneo, Virgin Red, VMLY&R.

Landmark Events:

Westminster City Council, The City of London Corporation, TfL, The Great Run Company, The Leadenhall Building, 30 St Mary Axe, The Aviva Building, Threshold Sports, Control Descent.

Trusts & Foundations:

Bally's Foundation, Dreamchasing, Edith Murphy Foundation, Ian Mactaggart Trust, John Armitage Charitable Trust, Peter Sowerby Foundation, Sandra Charitable Trust, The Sir Jules Thorn Charitable Trust, Teddy's Wish, TIOC Foundation, The Albert Gubay Foundation, The Annandale Charitable Trust, The Betty Messenger Charitable Foundation, The Brendish Family Foundation, The Childwick Trust, The James Tudor Foundation, The Jon Moulton Charity Trust, The Julia and Hans Rausing Trust, The Ness Fund, The Webb Family Charitable Trust, The Zochonis Charitable Trust.

Individuals:

Alessandro & Sophie Alagna, Paulo & Melinda Almeida, Kate & David Beck, Trudi & Gareth Boardman, Gerald Carroll & Sasha Wright, Joe Chambers, Kalpana Desai, Steve Edge & Jane Fogg, Dominic & Claire Freemantle, Nikki & Bruce Hodges (Metrow Foods), Oliver & Johanna Hudson, Chloe & Archie Hunter, Susan & Stephen Jackson, Richard & Hannah Jeens, Brian Meredith, Stephen & Benetta Morant, Lesley Norris, James O'Brien, Ioannis Papagiannakopoulos & Michaela Vergottis, Dominic & Lindsay Proctor, Julia Rosier, Bjorn Saven, Bryony and Ben Seabrook, Ian & Carol Sellars and Kassie Smith KC.

We would also like to thank Marina Fogle and her committee for organising the Tommy's Children's Carols.

Statutory grants:

Scottish Government

Tampon Tax Fund – Department for Culture, Media & Sport The Medical Research Council (MRC), part of UK Research and Innovation – UK Government COVID Medical Research Charity Support Fund

VCSE Health and Wellbeing Alliance – Department of Health & Social Care, NHS England and UK Health Security Agency

VCSE Health and Wellbeing Fund – Department of Health & Social Care, NHS England and UK Health Security Agency

Thank you to Mindshare UK for their pro bono support of our marketing activity. Thank you to Raj, Paul and Ben for their time and openness as part of our #InThisWithYou campaign.

"I believe London is here as a result of the help from Tommy's. The team were always trying to help us find an answer."



Patrons

Ron Dennis CBE

Sally Tennant OBE

Tommy's gave us hope for a way forward

Jenene had 4 miscarriages in total before giving birth to baby London. Her first miscarriage resulted in an overnight stay due to heavy blood loss while her second required surgical management at Birmingham Women's Hospital. While in recovery, a doctor referred her to the Tommy's recurrent miscarriage clinic but sadly, due to a large cyst, her third pregnancy also resulted in loss. She was prescribed progesterone during her next pregnancy but unfortunately miscarried again, an experience she found very traumatic. When she became pregnant for a fifth time, she continued to take progesterone and was given weekly scans at the clinic until she was 16 weeks pregnant. The Tommy's team also provided her with much-needed hope. reassurance and understanding throughout her pregnancy journey.

Trustees

Joe Chambers (Chair) Trudi Boardman (resigned 19/09/23) Dr Sonji Clarke Aedamar Comiskey Anita Charlesworth Professor Anna David (resigned 19/09/23) Stephen Edge (resigned 05/09/22) Professor Vanora Hundley (appointed 19/09/23) David Logan Dominic Proctor (resigned 21/04/22) Paul Rowlinson (appointed 10/05/23) Bjorn Saven (resigned 19/09/23) Kate Smaje Robert Stirling Dr Shema Tariq Hayley Tatum

Chief Executive Kath Abrahams

And our Tommy's Ambassadors for their constant support:

Katie Bonful, Dr Ria Clarke, Ben & Marina Fogle, Will Greenwood MBE, Amanda Holden, Myleene Klass, Caro Tasker and Elle Wright.



Together, we can fund pioneering research, support families throughout their pregnancy journey and transform care.

Together, we can save babies' lives.

To support our work, please visit

www.tommys.org/donate



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