



NOTTINGHAM & NOTTINGHAMSHIRE
Maternity Voices
Working in partnership to improve maternity services

Ethnic Minority Working Group Findings

January 2022

Black women are five times more likely to die as a result of pregnancy than white women. Women with mixed ethnicity are three times as likely to die as white women and Asian women twice as likely to die. (MBRACE-UK 2020)



The role of the MVP in reducing health inequalities

The role of the MVP in reducing Health inequalities is outlined in our Terms of Reference which state:

4.2 Enabling people from diverse communities to have a voice.

4.5 Forensic in the pursuit of continuous quality improvement with a particular focus on closing inequality gaps

9. The MVP is committed to diversity and equal opportunities and upholds women's human rights in pregnancy and childbirth.



Why did we choose to do this project now?

- Our previous survey response was almost 100% white → MVP project focuses solely on Ethnic Minorities to be true to our objective of reducing health inequalities.
- US research shows that doctors' ethnicity had an influence of babies' outcomes → Ethnic Minority maternity staff experiences matter and therefore they needed to be involved in this project.



Objectives

- ❖ Set up a working group of staff, volunteers and service users from Black, Asian and other minority ethnic backgrounds.
- ❖ Review national report recommendations regarding maternity care improvements and research for minority ethnic communities
- ❖ Agreed key recommendations for local Hospital Trusts in Nottingham and Nottinghamshire



Composition of the Working Group

Ethnicity	Number of members
Black	3
Asian	5
Mixed race	1
Eastern European	1
White British	1

Representatives	Number of members
Service user representatives	8
Nottingham University Hospitals	1
Sherwood Forest Hospitals	2



Reports reviewed

- ❖ Saving Lives, Improving Mothers' Care 7th annual report of the Confidential Enquiry into Maternal Deaths and Morbidity – MBRRACE-UK 2020
- ❖ Five Times More - Do You Know Your Rights 2020
- ❖ Inquiry on racial injustice in maternity care - Birth Rights 2021
- ❖ Midwives experiences of caring for high risk women from BAME groups - Royal College of Midwives, Health Education England 2020
- ❖ Maternal death: learning from maternal death investigations during the first wave of the COVID-19 pandemic – Healthcare Safety Investigation Branch 2021
- ❖ Social class, ethnicity and attendance of antenatal care in the United Kingdom – Journal of Public Health Medicine 2003
- ❖ Experiencing maternity care: the care received and perceptions of women from different ethnic groups - BMC Pregnancy Childbirth 2013
- ❖ Predictors of the timing of initiation of antenatal care in an ethnically diverse urban cohort in the UK - BMC Pregnancy Childbirth 2013



What Working Group members told us



I thought of myself as a very vocal woman but recognised myself in the research. I was readmitted due to slipping through the net.



People talked to me as if English was my second language



NUH and SFH seem to have less Ethnic Minority staff than you would expect



Ethnic Minorities Working Group Recommendations

Key recommendations for local Hospital Trusts

- ❖ Prioritise families from minority ethnic groups when implementing personalised care plans, continuity of care and antenatal education.
- ❖ Engage with families from ethnic minority communities when developing new services/updating existent services.
- ❖ Co-produce easy to read resources.
 - ❖ Update websites, leaflets and consider creating videos with subtitles, and make the translations accessible.
 - ❖ Information should be consistent and include maternity care options, appointments and contact details if the patient has concerns.
 - ❖ Explain clearly what can be expected in inpatient care, how many professionals a patient will see, who will care for them and who will support decisions about their care.
- ❖ Enrich maternity workforce with bilingual staff.
 - ❖ Explore the use of non-clinical staff: bilingual doulas, peer supporters and family mentors from organisations that support vulnerable women.
- ❖ Review current training and deliver regular interactive training either on-line or in-person in cultural competency, unconscious bias and/or equality and diversity training for maternity staff.
- ❖ Liaise with universities and review the cultural competency, unconscious bias and/or equality and diversity training provided during the midwifery courses.



Questions for the Trusts

- ❖ Are ethnic minorities less likely to access antenatal education and support because they don't identify with the midwives who provide it?
- ❖ What are the Trusts doing to eliminate the risks for ethnic minority women?
- ❖ How are ethnic minority women informed about how their ethnicity comes into play?
- ❖ What is the trust doing to attract and retain bilingual and ethnic minority staff?
- ❖ What training is being offered to improve midwifery staff's knowledge and skills regarding recognising health concerns in skin complexions that aren't white?



Next steps

- ❖ Meet with the representatives of the Trusts to discuss the recommendations and seek answers to the questions raised
- ❖ Set up follow up meetings with the Trusts in 3 months and 6 months to discuss the progress on recommendations.

