

Equity and Equality Listening Event Report



Introduction

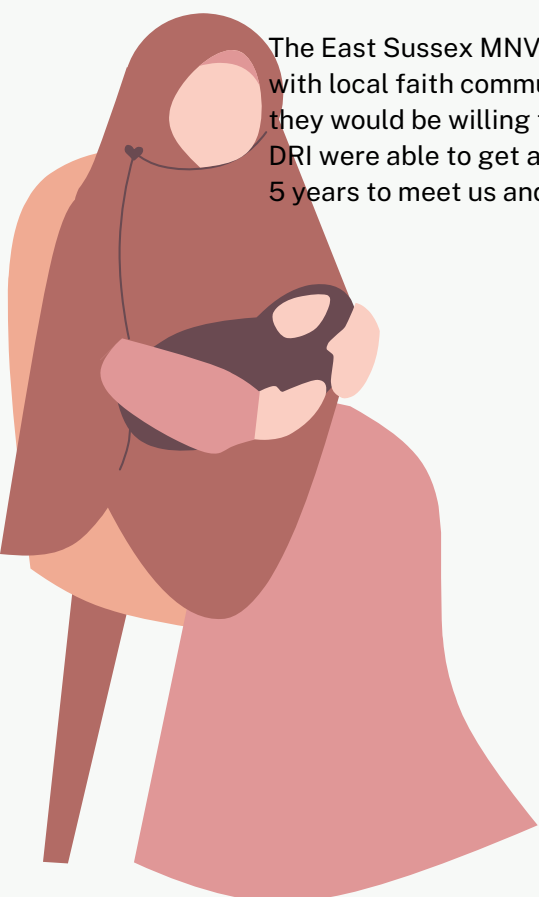
East Sussex
Maternity Voices
Partnership
2023

The East Sussex Maternity Voices Partnership are active members of the East Sussex Perinatal Equity and Equality working group. The aim of this work stream is to seek out the minority voices of birthing woman and people and hear their feedback and experiences of the maternity care they have/are receiving. These birthing woman/people are those who live in areas of deprivation, who identify as black, Asian and mixed ethnicity. Our aim is to celebrate the areas ESHT are doing well in, but to also listen, learn and help to make changes to areas that may need improvement ensuring all birthing woman and people are receiving the same high standard of care.

The East Sussex Perinatal Equity and Equality group is made up of NHS Commissioners, the LMNS, local authority, Health care professionals and the Maternity Voices Partnership.

After the recent MBRRACE reports the MVP wanted to seek out the "missing" voices from local black, Asian and mixed ethnicity communities to hear their experiences and feedback. It was clear that our own Service User online survey was not capturing the experiences of all minority groups and we struggled to connect with local faith and ethnic groups within our area. Even though we were able to listen to some individual stories of woman of ethnic minority who had used the ESHT Maternity service we knew we needed further outreach work to hear a larger number of voices to get a clearer picture. We were introduced to an organisation called Diversity Resource International (DRI) via the Perinatal Equity and Equality group. DRI help people from migrant and cultural diverse communities to access services that they need.

The East Sussex MNVP were able to fund DRI as they have wonderful connections with local faith communities. They were able to ask the woman in these groups if they would be willing to meet with the MVP and feedback the care they received. DRI were able to get a group of 5 Syrian woman who had given birth within the last 5 years to meet us and share their individual experiences.



Listening Event

Department or Agency
SDG Progress Report
2020

The Listening event took place on Monday 19th June 2023 at Concordia Hall, St Leonards. This venue was chosen as it was relatively close to where the Service Users lived and was easily accessible by foot or public transport. All travel expenses were funded.

East Sussex MNVP chairs HR and HD facilitated the session as well as a public Health midwife .

6 participants were in attendance on the day including a bilingual advocate. 5 of these woman had given birth within the last 5 years, but a majority had given birth within the last 18 months, the youngest baby being 4 months old.

There were two members from the DRI team that stayed at the beginning to help set up and settle the group of service users in.

“If you don’t push they won’t listen to you.”

Whilst the service users were arriving we took information such as age, ethnicity and what area they live in.

All the service users first language was Arabic. Four woman identified as Arab and the other 2 identified as Syrian.

Their ages ranged between 21- 40 years old.

They all lived between the Hastings and St Leonards area.

Before the meeting Hannah R and Hannah D had worked together on what we and the Trust wanted to know about these Service Users experiences. We also used the MBRRACE report as a reference to help inform the specific areas we wanted to explore more deeply during discussions.

We made sure we covered the whole of the service users journey from antenatal care, labour and birth, Postnatal care and community support.

Katie McDougall had her own set of questions that she had prepared that focused on Public Health and was able to feed those into conversations.

Antenatal care:

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Appointments (Midwives/ Doctor's/ Scans and Clinics)

- 1 Service user was under the Lighthouse team (continuity of care team for young pregnant women/people) and had a named midwife. She was very happy with the care she received from the team.
- 5 of the Service users saw the same community midwife at each appointment.
- 1 saw a number of midwives. she wished she had the continuity of carer as she didn't like having lots of different midwives, as she found it hard make relationships with midwives - particularly with language barriers.
- During clinic at the hospital a couple of service users expressed how they sat for 5/6 hours in corridor to be seen. They said the chairs were uncomfortable and they weren't able to get any refreshments. One also expressed how she was too scared to go to the toilet in case she missed seeing the doctor.

Communication:

- 1 service user said that the Dr she saw spoke Arabic, and so was able to talk to her in her own language, she said that this helped her understand things more and she felt well looked after.
- 1 service user said that she didn't feel listened to around her sickness and it wasn't until she was hospitalised that she got any support.
- A number of Service Users said they didn't always know what was happening due to language barriers.
- A translator was sometimes offered - but not all the time.
- 1 Service User expressed that she wasn't able to request or choose a female translator. This made her feel very uncomfortable as she was talking about her body to a male translator. The midwives did place a screen between the SU and translator during a scan to try and maintain dignity but this meant the SU could not hear the translator properly.
- 1 Service User said that they were left worried for 2 weeks following a scan that showed possible abnormalities. There had been no explanation given to her about what may be wrong.

Involvement in care (preferences/plans and feelings):

- 2 Service Users voiced that they were not involved in decisions that were made during their antenatal appointments with one service user saying - "They plan it for you"
- 1 Service User said "not all your fingers are the same" in relation to personalised care.
- 1 Service User shared that she had Female Genital Mutilation (FGM) and explained 3 Drs refused her maternal caesarean birth request, telling her they would "just cut her"

Birth Venue:

- All Services Users felt they were given a choice as to where they wanted to give birth. All chose to give birth at Conquest Hospital as they felt a hospital was safer.

Antenatal care:

East Sussex Maternity
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Contact with Healthcare Professionals (Kindness/ care/ accessibility):

- All Service Users felt they could speak to Community Midwives about concerns (e.g baby movement) and for reassurance.

Information - where from, anything missed, antenatal education access, barriers faced?

- 5 Service Users received info on Vit D and Folic acid and the importance to take them. Though 1 did not.
- All were offered a Free NHS Antenatal Education sessions, all chose not to access saying "If I need anything I ask my mum".
- Some felt isolated without family nearby.
- No information was given around Healthy eating or Health Coach.
- All said they were not spoken to specifically about pregnancy vaccinations, apart from the Covid vaccine. None of the service users received a flu jab or whooping cough injection whilst pregnant.
- Information was given on stop smoking/vaping services.
- When asked where they seek information all replied they would get information from their mothers and/or other female family members who were mothers as they were considered the experts .



Labour and Birth:

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Communication:

- Translator sometimes offered, but not always.
- 1 Service User said that her Husband's consent was asked and not hers.
- 1 Service User said "I found out later what they did, I wasn't asked".
- 1 Service User said that she was left pushing for extended amount of time not knowing what the "plan" was.
- Translator made own assumptions and caused anxiety and miscommunication between mother and HCP's around FGM.

Involvement in decision around care listened to?

- 1 Service user said that she didn't want a "natural" birth, and wanted a caesarean birth due to FGM. She laboured for a long time. When a doctor came to examine her, they told her she needed an emergency caesarean birth. Although this is what she wanted she had been requesting a planned caesarean birth throughout her entire pregnancy and her wishes were not listened to. She found asking, the push back from the Drs and having to explain very distressing.
- 1 Service User said that she "told them they need to cut" (episiotomy). She says that she was not stitched up properly "there was no stich from the outside" and that she is now suffering pelvic health issues (incontinence and possible prolapse.)

Staff (Approachable/ available):

- Some found the staff to be rude towards them, and they expressed how their cultural beliefs and practices were not always taken into account. For instance one service user was told she shouldn't swaddle her baby.
- Another Service User said that she kept getting conflicting advice between the midwives, one midwife was happy for the Service User to move around the room and said she had to stay on the bed.
- 1 Service User praised the Lighthouse team midwives for being fun.



Cared for- respect, dignity, consent, privacy, kindness, safe:

- 1 Service User commented on how thankful she was for the midwife who took pictures of her baby being born for her.
- 1 Service User said that she felt safe and well looked after.
- 1 Service User said the doctors did not gain consent from her before procedures.

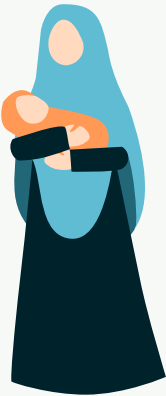
Pain management- options, choice:

- All said they knew their options around pain management.
- 1 Service User expressed that her pain was managed well.
- 1 Service User said they had an issue with the siting her Epidural leading to a headache and was not able to eat or drink after Epidural was sited.
- 1 Service User said that a HCP refused to give an Epidural due to cost but gave a lower dose instead.



Postnatal Experience:

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Communication:

- 1 Service User said that it wasn't explained to her why blood was being taken from her baby.
- Contraception was discussed with the majority.

Staff approachable, supportive and available:

- All expressed that there seemed to be difference between the day and night staff. Day staff seemed more attentive/ whereas the night staff were not so much.
- During a week stay post birth in hospital 1 SU went home for a couple of hours and staff seemed unaware of this.
- 1 Service User expressed "If you don't push they won't listen to you."

Needs met-cultural, dietary, infant feeding support, physical care, emotional health:

- 1 Service User had a support worker upon being discharged from labour suite and felt well supported.
- 1 Service User expressed how she didn't feel supported, she admitted that she didn't use the call bell to seek help on the ward but did say "they saw me crying and they did nothing"
- 1 Service User said that there was no Halal food options, she was told she could not bring food in to the postnatal ward, but her mum brought in food anyway, otherwise her diet would of been extremely limited.
- 1 Service User said that a Midwife was very kind and held her baby whilst she slept.
- A Midwife gave a bottle of Formula to a baby. The Service User was upset as she was struggling to breastfeed, the midwife replied "we need to listen to what the baby wants." The service user was not given any support to breastfeed.
- 1 Service User said that a "midwife said just try" when experiencing breastfeeding difficulties.

Postnatal ward environment:

- A number of Service Users said they that would have liked a support person of choice to stay overnight to help with baby so they could get some rest.
- 1 commented that the wards were very busy.
- 1 Service User said that she would have liked her husband and mother to have supported her on the postnatal ward during the day.



Community Support Experience:

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Emotional needs- who from, possible barriers faced:

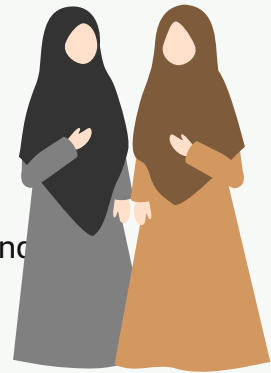
- All service users expressed that they kept their emotional difficulties to themselves. "Women in our culture are seen to be strong, we don't talk about our feelings"
- One SU had a key worker, who helped support her.
- 1 Service User said "after giving birth I was lonely" a lot of the other woman in the group agreed with this.
- A birth debrief was offered by the Lighthouse Team for one of the Service Users.

Infant feeding support- who from and possible barriers faced:

- Despite Breastfeeding previous children 2 SU's could not this time, and they didn't access support.
- Some sought support from named midwives but didn't feel there was much support.

Practical support:

- All said that they relied on their Mother's, family, peers with children, husband support "I would go to my husband for support"
- Some attended the Health Visiting groups in the community.
- 1 Service User said that she met another mother at Playgroup who is a Dr who helped support the whole family (Church group in London Road on Tuesday mornings, term time only).



Where do they gain information from:

- All said that they gain their information from their Mothers and peers with children, they sometimes looked on Google. They only sought advice from Drs for physical health and what they classed as "medical" reasons.

Health care professional contact:

- 1 Service User commented "I saw a Health Visitor a couple of times and then nothing".
- Another said " you can find good ones and bad ones" about health visitors.
- Another said that a Health Visitor entered rooms within her home without permission (her husband was working and it made her feel uncomfortable).
- All expressed that they had trust issues and fear around Health Care professionals. saying "I worried they make take my children"
- One Service User felt that she was being judged and that assumptions were made about her being a first time mum at a young age. They questioned if she was married and how they afford to rent such a nice house.
- "There is racism" when asked for examples of this it was from previous experiences. 1 SU told us some are "overly nice and patronising".

Themes:



All 6 Service Users said that they didn't always have access to a translator and expressed that male translator made them feel uncomfortable.

All Service users expressed that they didn't feel they had a say with their birth plan and that consultants made the decision without their input.



None of the Service users had their pregnancy vaccinations such as whooping cough, and didn't know about these injections and their importance.

Over half of the service users felt that their consent was not asked before certain procedures.





All Service users felt that they could talk to their healthcare professionals if they had any concerns with their or their families health.

All service user agreed that they would not seek help for their mental and emotional health needs, and that if they needed parenting support they would not ask a health care professional.

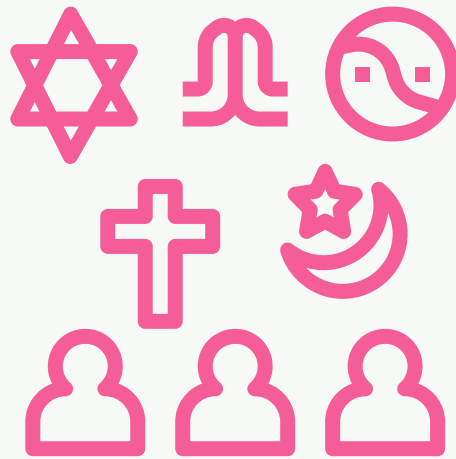
The group voiced that they were scared that health care professionals would take their children away from them.

SU expressed that if they needed any support or advice for infant feeding, baby sleep etc, they would ask their own mothers, woman of their family/ community or there husbands. They would not seek professional advice and support.



When asked about who they would contact for help with their own emotional and mental health. The group all said and agreed that they wouldn't seek support, and that it is not something they would talk to anyone about “In our culture woman are seen as strong and you just get on with it.”

All the Service users felt that their cultural beliefs and traditions were not listened to or taken into consideration during some of their care.



Some SU asked for support with breastfeeding from midwives, but felt not much support was given. 2 SU said that even though they had previously breastfeed their other children, they didn't breastfeed this time around and didn't seek support.

Communication:

There seems to be a theme around communication between Service Users and staff

The translator service:

The translation service was not always offered to Service Users at their appointments and this caused confusion and service users not feeling they could advocate for themselves due to language barriers.

Some service users felt uncomfortable with the translator being a male, particularly during appointments where examinations took place. A service user expressed that in her culture a male that is not her husband cannot see certain parts of her body unless they are a doctor, and that a male translator is not right for them to have. One service user who was under a social worker rang her social worker in distress saying "They have given me a male translator again." when she was given a male translator, her social worker came to the hospital to support her. One service user found that her translator made up their own assumptions about her and her pregnancy.

Consent:

Most service users said that procedures were done on them without their consent and that "things would just happen to them" and they would find out afterwards. They did not always feel in control of their care.

All service users agreed that they didn't feel they had a say with their birth plans and that doctors decided for them.

Information:

None of the service users received information around antenatal vaccines (except the covid vaccine) and they didn't not know that these injections were available to them. They also did not receive information on healthy eating.

Support:

All service users agreed that if they had any physical health concerns during pregnancy they would seek help from their community midwife or a doctor.

All service users said that they wouldn't seek advice from a health visitor as they are scared they will take their children away from them. They only seek health care professional advice when there is a medical issue. It was very clear that for any other advice and support the service users would rely on their mothers, other women of their community, their husbands for support and sometimes Google for information.

They also expressed how they would not seek emotional health as women and mothers are seen as strong and that "you just get on with it."

Cultural beliefs:

All service users expressed how they didn't feel their cultural beliefs were always taken into consideration, whether this is around male translators (as previously mentioned) or with how they swaddle and hold their babies.

A big concern was also around the food available on the wards was not Halal, except for jacket potato, which one service user, who spent 5 days in hospital, couldn't bare to eat plain jacket potato every day. She asked staff if her mum and partner could bring food in for her and was told it isn't allowed. Therefore her partner and mother would sneak food in. In her culture the food that you eat after birth is important and they believe certain foods are important for the mother to help support her recovery and feed baby.