



Report into failures on Nottingham maternity wards highlights fatal impact of racism

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Racism

Racism â?? [Yesterday, 24 June](#), the *Canary* reported on the publication of the damning Ockenden report. It detailed extensive failures in maternity and neonatal care under Nottingham University Hospitals (NUH) NHS trust.

In particular, the report highlighted staffâ??s refusal to listen to patientsâ?? concerns. The failure was even more prominent for global majority patients, along with those from other marginalised backgrounds.

Today, weâ??re going to take a closer look at those issues, including the patientsâ?? own accounts of their experiences. We should also note that the report [took measures](#) to ensure that it included the perspectives of people from marginalised and disadvantaged groups.

This included reaching out to faith groups like United Black Churches of Nottingham and the Nottingham Muslim Womenâ??s Network, along with support groups and charities focusing on Roma women, refugees and asylum seekers, and survivors of domestic abuse, among others.

Medical racism â?? â??Why are you having another baby?â??

As the *Canary* [previously reported](#) of the [27 maternal deaths](#) that Ockendenâ??s team reviewed:

11 of the deaths occurred to women living in the most deprived areas of the city and 14 occurred amongst women who were not white British.

On top of this, the global-majority patients who participated in the review also frequently reported communication failures, systematic barriers, and mistrust between patients and staff.

Whilst these findings are troubling in themselves, the report particularly sought to include direct accounts from both patients and staff. Itâ??s these testimonies that reveal the sheer depths of the discrimination at play in NUH maternity care.

The report highlighted the impacts of â??cultural misunderstandingâ? and stereotyping on patients from global-majority backgrounds, along with what it called â??diverse sexual orientationsâ?? (an individual is not diverse; a group is diverse). It included three illustrative quotes from first-hand accounts:

- â??the doctor said, â??Why are you having another baby? Youâ??ve had so many babies before.â?? And that made me depressed as well. Why did she say that to me?â? (2015)
- â??Iâ??m in a same-sex relationship. They werenâ??t aware that she was my wifeâ? asked if we were sistersâ?; it felt like I was in a psychiatric hospital.â? (2020)
- â??â?the nurse apologised that she didnâ??t know what I was going throughâ? she wasnâ??t communicating well to me.â? (2020)

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Red flags attributed to â??language barriersâ? and

Alongside the direct quotes, Ockenden included case studies documenting fatal failures. In one example from 2013:

a woman presented with headaches, confusion, disorientation and incontinence. Her symptoms were not treated but were attributed to mental-health concerns despite no previous mental-health history. Some of her behaviour was also attributed to a language barrier. Two weeks later she was admitted to hospital where she collapsed. She underwent surgery for what was later found to be a malignant brain tumour. She died five days after surgery.

The review team noted that NUHâ??s issues were [often compounded](#) by the fact that it would downplay evidence of harm. Because of this, the trust routinely failed to learn lessons from its errors.

As such, itâ??s unsurprising that a [shockingly similar](#) incident occurred again, 5 years later:

In 2018 a woman of North African origin who had lived in Nottingham for many years and who spoke excellent English reported persistent headaches throughout her pregnancy. She also reported an episode of slurred speech and facial asymmetry alongside a headache. Her symptoms were wrongly attributed by hospital staff to "hormones" and were not investigated.

The woman's family repeatedly asked for the hospital's advice on her behalf. However, hospital staff likewise disregarded their concerns. The report goes on:

After the birth of her baby, she began to have difficulty communicating and explaining her symptoms. She underwent an MRI scan which showed a large frontotemporal mass with appearance in keeping with a meningioma. The mother had a cardiac arrest whilst awaiting surgery. She was resuscitated and admitted to the intensive care unit where she later died.

Staff report over and over again

Ockenden's report

also noted that the staff at the NUH maternity and neonatal wards failed to reflect the population it sought to serve. Whilst about 40% of Nottingham's population came from a global majority background, just 8% of the midwifery workforce could say the same.

As such, even the staff who engaged with the review frequently failed to identify racism as an issue. However, three accounts from staff were particularly revealing:

- "Saw patients treated differently dependent on race. Saw traveller/gypsy/Roma women treated appallingly. Covert racism to black/brown women but overt racism to Eastern Europeans. Translation service poorly used and poorly accessed." (2024)
- "Language Line was not always available, used picture cards. Experienced racism, toxic blame culture if you did not fit in. Not many black midwives employed. Saw racist attitudes to black women labelled too loud, too demanding." (2024)
- "Witnessed poor care of women whose first language was not English. DATIXed [incident reporting software] the incident and it was not followed up." (2024)

(Still) a necessary conversation

Sadly, acknowledging the combined force of medical racism and misogyny is more relevant than ever right now.

Right-wing figures [like Nigel Farage](#) have spent recent weeks bleating about a "two-tier system" biased against white people in the UK. In particular, he's spoken against the Equality Act, which [names race and sex](#) as protected characteristics, and diversity initiatives that stem from it.

Meanwhile, the Tory leader [Kemi Badenoch](#) has attacked the Public Sector Equality Duty. This is the mechanism that requires public bodies to consider the impact of their actions on marginalised people.

Likewise, [shadow equalities minister](#) Claire Coutinho specifically called to look for any explanation other than racism for the disproportionate rates of Black maternal deaths.

Itâ??s reports like Ockendenâ??s that these racist pronouncements from the right seek to obscure. More precisely, itâ??s the fact that similar reviews, [over](#) and [over again](#) [highlight](#) the [impact](#) of [medical racism](#) on Black and Brown families.

Of course, these reports and reviews are no substitute for real change. However, whilst our politicians seek to deny even the basic fact of medical racism, they will remain an essential step on the road to righting this dire form of discrimination.

Featured image via the Canary

By [Grace](#)

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