Born in the UK: Qualitative study investigating maternity and postnatal care needs of UK-born women from ethnic minorities

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1 Introduction

Research context
- Longstanding history of migration in the UK
- Increasing numbers of second generation
- Research indicating poorer maternity outcomes for some ethnic groups and care related access barriers
- Most past research concentrated on migrant women
- Very little known about UK born ethnic minorities

Objectives
- To explore the maternity care needs of UK born women from ethnic minorities.

Specific themes of interest are:
- Perceptions of care needs among the UK born
- Perceptions of changes in family support between generations
- Attitudes towards risky habits
- Individual and service related factors affecting uptake of care

2 Methodology

Qualitative study based on Grounded Theory design

Respondents
- UK born mothers of Indian, Pakistani, Black African, Black Caribbean and Irish background
- Partners
- Health Care Providers

Geographical area
- London (6 Boroughs)
- Birmingham
- Bradford

Methods
- Focus group discussions: mothers alone, couples
- In-depth interviews: mothers, health care professionals

Analysis
- Interviews transcribed
- Open Coding (Grounded approach)
- Initial codes grouped in to higher level codes (concepts)
- Concepts linked to a core category (variable)

3 Preliminary Findings

Perceptions of Health Care Professionals

8 in-depth interviews from an East London maternity unit catering for a significant proportion of black mothers

Fig 1: Pattern of response categories emerging

Use of maternity care

Individual factors

Service related factors

Suggestions for improvement

Diverse care experiences

Findings - Highlights

Descriptions of 2nd generation

Second generation more ‘on a par with the white British’
- Higher levels of knowledge than 1st generation, but low on ‘common sense’
- Attitude ‘very English’
- Vocal, demanding can be aggressive to some extent
- Need to do ‘a lot more to appease’ than the 1st generation

Use of maternity care

Timelier antenatal booking than 1st generation
- Good in keeping hospital appointments in general
- Accept prenatal screening if advised
- Poor attendees in antenatal classes
- Hospital delivery is the norm
- Expectations of intervention free labor

Individual factors and care uptake

Biologic predispositions

Socio-cultural factors:
- Higher levels of autonomy in decision making
- Mixed feeding patterns - breast and bottle feeding
- Indication of domestic violence in terms of mental abuse
- Better social support
- Risk behaviour - no clear picture emerged

Service related factors and care uptake

Care organisation - long waiting time, infrastructure facilities
- Client - provider relationship: expressed to be good
- Ethnic friendly initiatives - a few listed, but no indication of their appropriateness for UK born

Suggestions for Improvement

Varied from targeted antenatal services and improved postnatal care in the wards to improvement in infrastructure and ethnic diversity in the food provided

4 Expected Outcome

Information on the impact of acculturation on the maternity care needs of ethnic minority women to develop appropriate policies

Generation of hypotheses that can be tested in further research

5 Key Messages

What is already known:
- Research on poorer maternity outcomes among women of some ethnic minority groups has indicated epidemiological and service related factors. While most of the research has been focussed on migrant women, very little is known about those born in the UK.

What this study will add:
- The study is tracing the advantages and disadvantages of acculturation on maternity care experiences of ethnic minority women both in terms of the uptake of care and the factors contributing to it.
- Additionally, the perceptions of health care professionals are being explored as these can affect their interactions and promote or hinder access to care.