



Restorative Practices for Black Maternal Healthcare

Paul Addae and Shaun Danquah

Restorative Practices for Black Maternal Healthcare Redress

Our medical scepticism research project uncovered that women's poor experiences with maternity care and reproductive healthcare impacted the trust in which black and minority ethnic women had in the NHS and healthcare generally.

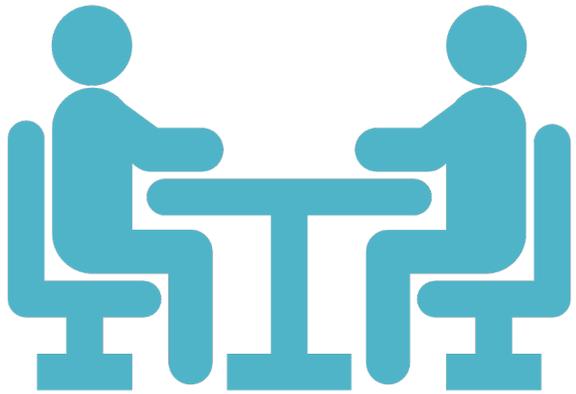
It has been documented for some time that the experiences of black and minority women during maternity have been poor, which correlates with black women being the most likely to die during childbirth.

Research from both the UK and the US has revealed huge disparities when it comes to maternal health. Anekwe (2020) in an article in the *British Medical Journal* noted that according to the *Mothers and Babies: Reducing Risk through Audits and Confidential Enquiries Across the UK* report, conducted by researchers from Oxford University, black women are five times more likely to die, and Asian women twice as likely to die, compared with white women.

They found that between 2014 and 2016 the rate of maternal death in pregnancy was 8 in 100,000 for white women, 15 in 100,000 for Asian women and 40 in 100,000 for black women.

Christine Ekechi, a consultant obstetrician and gynaecologist at Imperial College Healthcare NHS Trust in London, noted in an article in *Medical News Today* in August 2020 that black women in the UK are negatively affected by racial bias in medicine.

In the United States, African-American women, and also indigenous American women, are three times more likely than white women to die during pregnancy. In New York City, black women are 12 times more likely to die during childbirth than white people.



Our research revealed a strong need for support wherein women could talk through their experiences with healthcare. There is a demand for a different complaint system and a better way to help parents know where to go to complain as well as quick acknowledgement of the need for redress.

Restorative Practices



Restorative practices is quite new for healthcare and the notion arrived from the criminal justice sector. There is a need for open and honest communication between patients and families on the one hand and experienced healthcare professionals on the other hand.

Not only does this create an environment where empathy can thrive, of which our medical scepticism research has revealed a huge gulf, but also is a disruptive approach to directly dealing with medical liability and patient grievance for marginalised communities.

A restorative approach offers healthcare professionals to reflect on their own practice directly with patients or families who have experienced either harm or poor treatment. This also thereby helps to facilitate change in future practice and also instils greater empathy in healthcare.

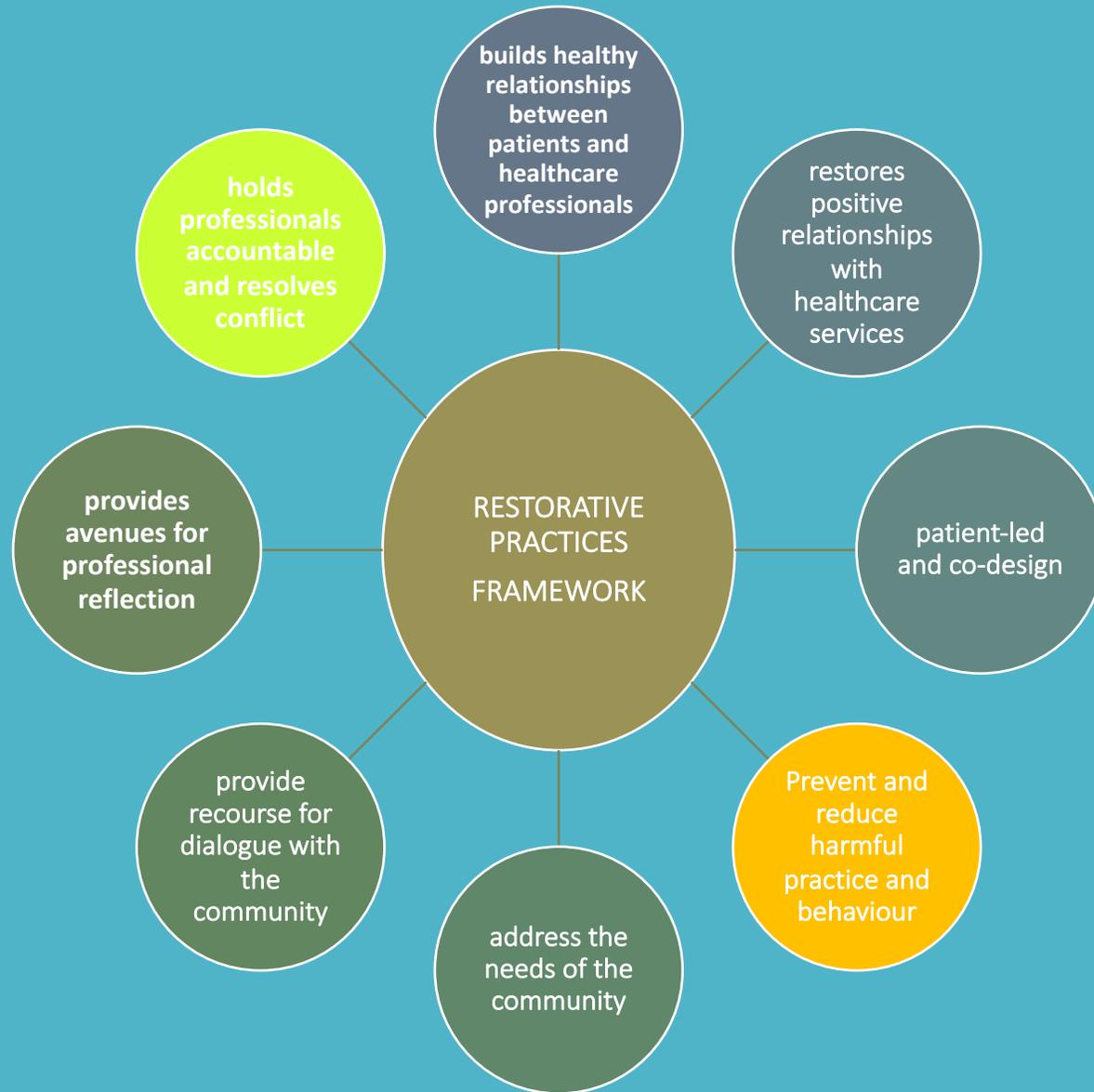
Innovative and fresh dialogue can be undertaken in a non-defensive non-aggressive environment wherein healthcare professionals understand what it is like to experience harm, and patients and families also understand the complex dynamics in healthcare settings which govern the performance of healthcare professionals in their daily practice that may lead to harm.

Restorative values include (Wailing, 2021):

- Active participation
- Respectful listening and communication
- Truthfulness
- Accountability
- Empowerment and equal concern

A restorative inquiry involves looking at:

- Who has been hurt and what are their needs? **(past focus)**
- Who is responsible for the harm and what are their obligations? **(present focus)**
- How can harms be repaired and relationships improved?
- How can we prevent it from happening again? **(future focus)**



PLEASE GET IN TOUCH FOR FURTHER INFORMATION

shaun.danquah@tsip.co.uk
paul.addae@tsip.co.uk

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