

The mothers in exile project: women asylum seekers' and refugees' experiences of pregnancy and childbirth in Leeds

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Aims

The project looked at the antenatal, birth and post natal experiences of asylum seeking and refugee women in Leeds to identify gaps in current service provision and examine how immigration status affected their access to services to help shape future policy. The project was commissioned by Womens Health Matters, and funded by NHS Leeds Children's and Maternity Services and Leeds Special Grants Programme, in response to issues raised by the Leeds Maternity Health Needs Assessment 07/08 – 08/09 and a report for the Maternity Services Liaison Committee. It is aimed at both service providers and policy makers.

Methodology

In depth, semi structured interviews were carried out in 2009 with 20 women aged between 16 and 43 who lived in Leeds. In total, 24 births were discussed. The majority of women originated from African countries with the remainder coming from China, Iraq, Syria and Palestine.

The women were contacted through a number of different organisations and individuals to ensure as wide a range of experiences as possible. However, it is noted that, as the majority of the women were contacted through support organisations, this may have skewed the findings resulting in the number of women who received additional support during their pregnancies being disproportionately high.

The appendices to the full report give examples of the information given to the women ahead of the interviews and details of the interview questions.

Key issues

The report looks at the impact of the current asylum system on pregnant women seeking refuge in this country. It also examines what happens when these women become part of the maternity system, in particular ante natal care, experiences during labour, post natal care and interpreting and communication issues throughout.

Key issues highlighted include:

- isolation
- poverty/homelessness and the effect this has on access to food and transport
 - variations in standards of care from community midwives
 - inconsistent use of interpreters

In addition, some women were moved to different accommodation several times during their pregnancy [due to change in asylum status etc] and this had a detrimental effect on healthcare provision and support networks which increases the risk to mother and baby.

There are some areas of positive practice highlighted in the report, in particular midwives working out of SureStart Children's Centres and doulas/befrienders arranged through the voluntary/community sector.

Recommendations

The report offers a number of recommendations for individuals and agencies in contact with pregnant asylum seeking and refugee women. These include recommendations relating to the provision of specialist care for asylum seekers and refugees, training for health professionals, community and hospital practice and interpreting services.

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Full report and summary available in pdf format.

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