

# Midwives caring for asylum-seeking women: research findings

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## Aims

The aim was to document the experiences and knowledge of midwives working with asylum-seeking women accessing NHS maternity services in order to improve practice and policy.

## Methodology

- The research used semi-structured interviews to capture qualitative data.
- The target subjects were qualified midwives with a minimum of 1 years practice and experience of working with asylum-seeking women; in total, 10 midwives agreed to be interviewed.
- The scope was restricted to 1 NHS Trust operating in the north of England.
- The study was publicised through email, distributed by a senior practitioner in the Trust.
- All interviews were face to face, and were audio-recorded, before being transcribed.

Accepted research techniques of sampling and analysis were utilised, and thematic analysis was applied to the data, and findings grouped into 2 main themes and 4 sub-themes. An 'audit trail' of influences, events, actions and decisions taken was made. However, the authors acknowledge that this was a small scale exploratory study and therefore cannot be representative.

## Key issues

- The research identified 2 all-encompassing factors - time and communication. These had a significant influence on the four major themes emerging from the evidence: negotiating systems, the stress of caring, attitudes, and learning 'on the job.'
- Time: midwives needed more time to work with women asylum seekers in part because the complexity of issues they presented with, but also because language barriers meant extra time was needed to understand clients' situations and communicate information effectively.

- Communication: the use of interpreters was identified as critical, and midwives interviewed stressed the importance of the on-going relationship between midwife and interpreter. Interpretation was also time consuming.
- Communication: the complexity of many clients' lives was noted, which required significant multi-agency contact, especially with regard to immigration status.
- Finally, the authors indicate that learning how to work effectively with women asylum seekers was mainly done 'on the job' and cultural competency had largely been absent from professional training.

## Conclusions

The article concludes that the considerable knowledge and skills that are required to providing maternity services to women asylum seekers is a specialist role, and that the study demonstrates the need for better training and support in this area, particularly when the birth rate is rising. They also point to the personal and emotional cost of providing support.

## Recommendations

The following recommendations were made:

- That midwives should have sufficient access to, and training on, the use of interpreters.
- That the extra demands of working with asylum-seeking women should be recognised and built into work schedules.
- That a one stop information hub be available, offering resources on asylum-seeking women.
- That the personal support needs of midwives themselves be recognised
- That pre and post registration programmes for midwives include better training and awareness on working with asylum-seeking women.
- Finally that continuity of care is essential and migration services should factor this in, as well as establishing better links to maternity services.

Web Link

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