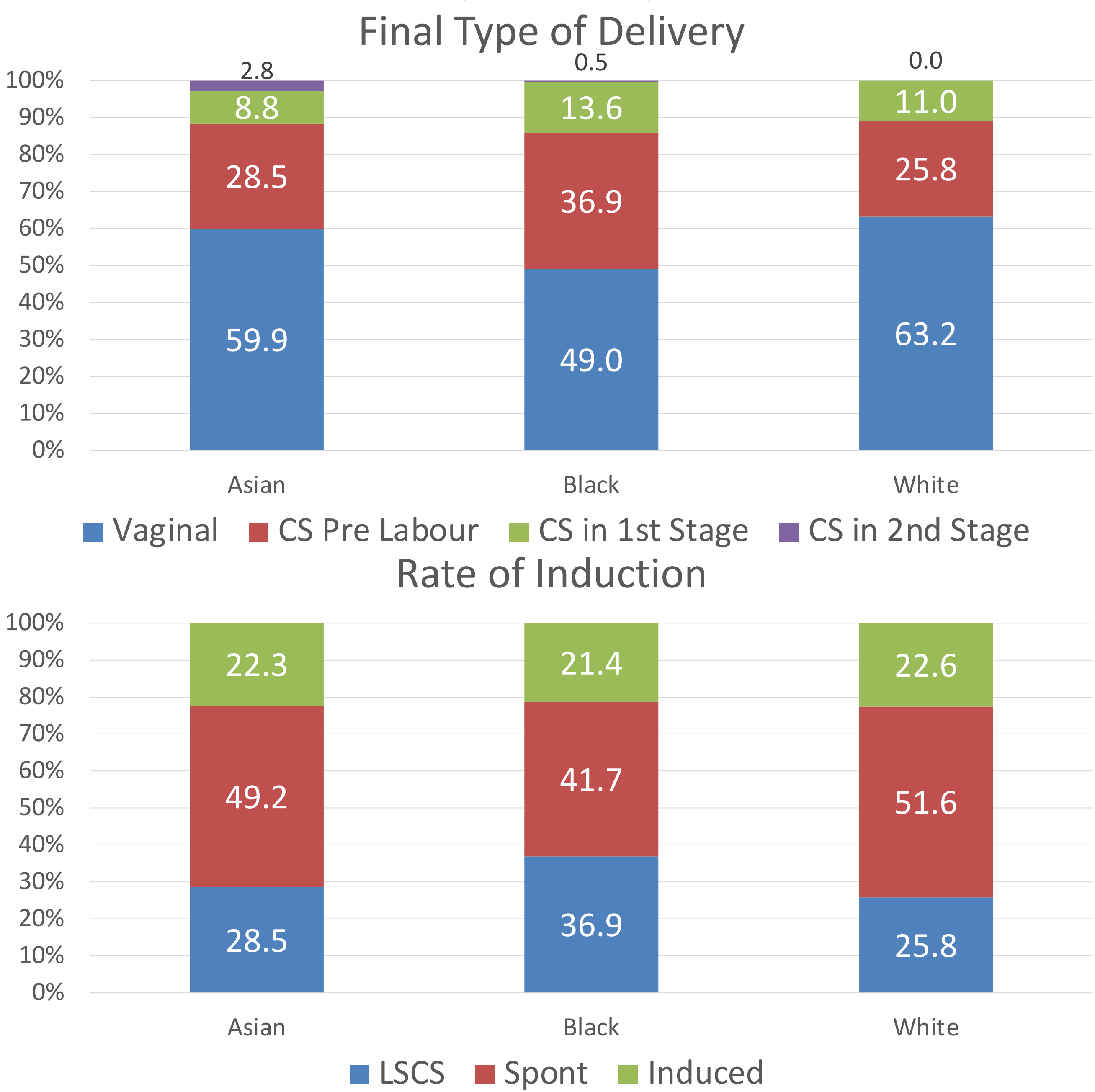


Racial Disparities in Outcome in a Diverse District General Hospital Obstetric Unit

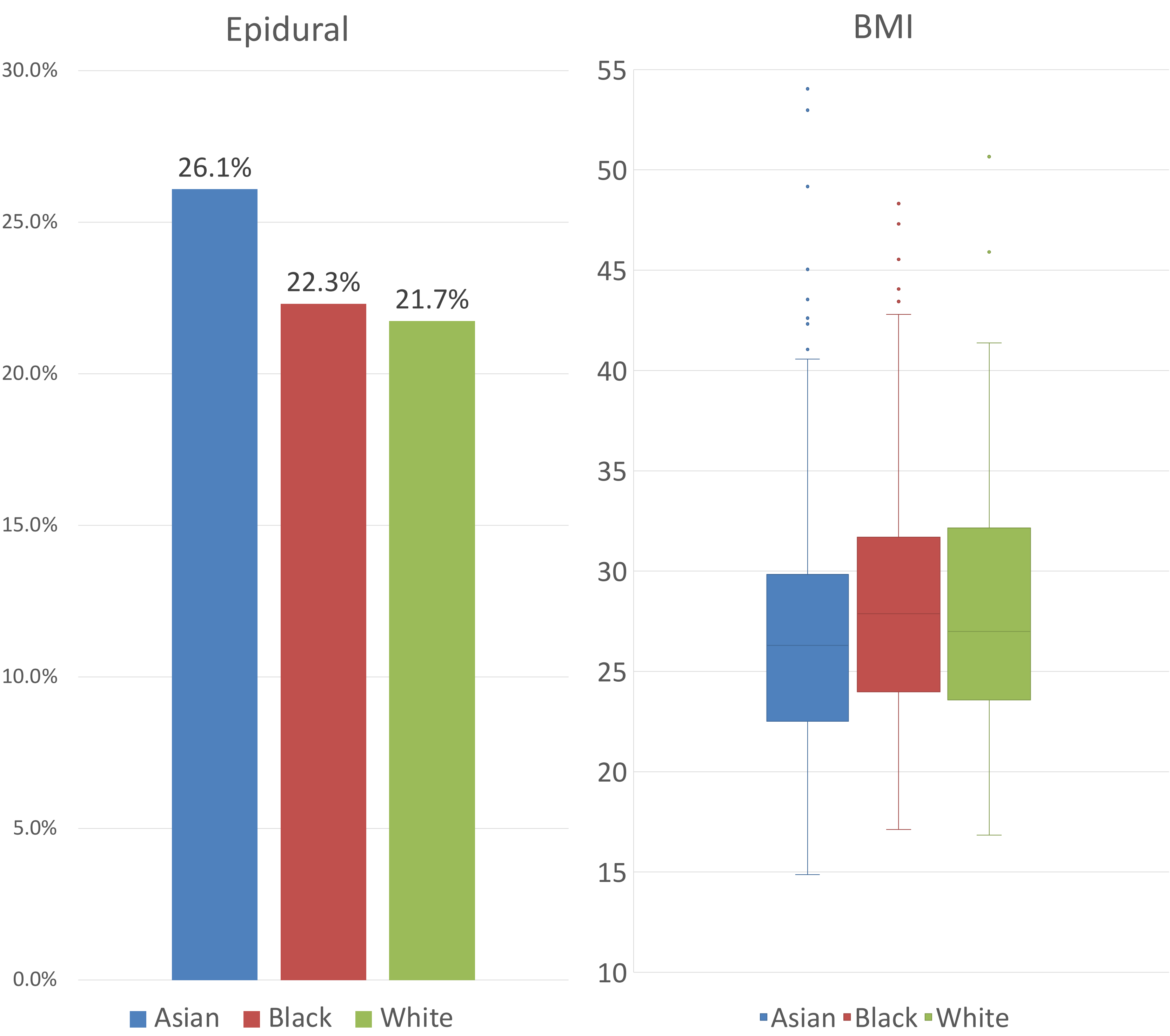
INTRODUCTION

- Disparities in obstetric & neonatal outcomes by ethnicity are an undesired reality in the UK.
- Maternal mortality rates are 2-4 times higher for women from Black, Asian & Minority Ethnic (BAME) backgrounds [1]. They have also reported higher rates of ‘feeling unsafe’ and ‘not listened to’ [2].
- Sandwell & West Birmingham NHS Trust (SWBH) has a highly diverse and often deprived population with a third of patients being able to understand little to no English.
- We evaluated the existence of differential rates for multiple outcomes by ethnicity.



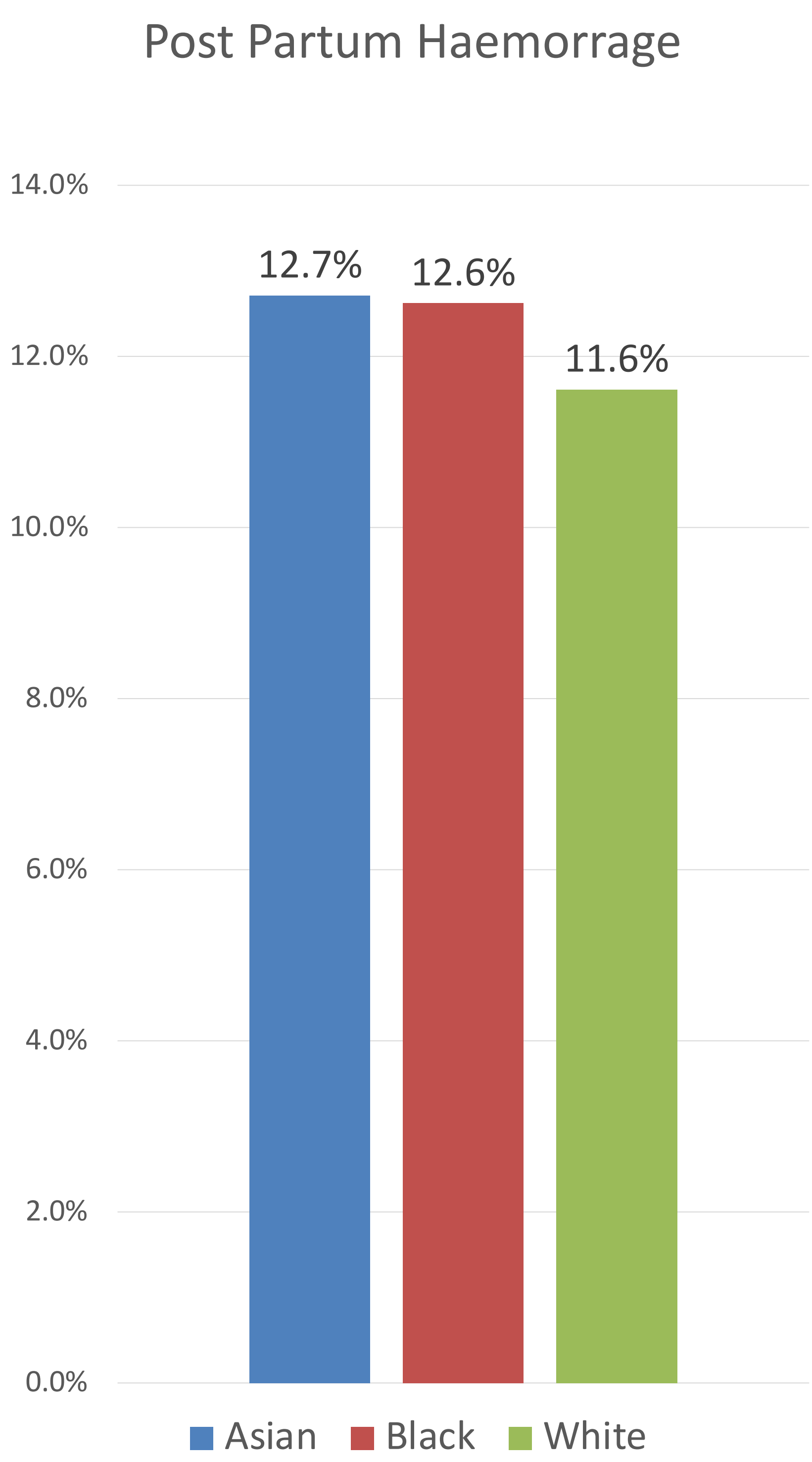
METHODS

- Sample data was requested for births between June - December 2023 through Badgernet.
- Data for ethnicity, final delivery method, onset of labour, BMI, neuraxial labour analgesia, estimated blood loss (EBL) and Apgar scores at one and five minutes was obtained.
- Similar ethnicities were combined into three groups: Asian, Black and White.



RESULTS

- 790 births were identified (approximate birth rate is 6000 per annum so this sample represents 25% of births).
- 75 were excluded due to unclear ethnicity information.
- The mean BMI was 26.8 (Asian), 28.4 (black) and 28.1 (white).
- Apgar scores had minimal variation across the ethnicities.**



DISCUSSION

- The results show low outcome disparity by ethnicity when compared with the national figure (14.2% (16%)) [calculated as the difference between highest and lowest rate in any category].
- Factors contributing to this may include an overall strategy towards enabling and empowering all patients.
- This includes:
 - having a multi-cultural staff base experienced in care needs of a diverse population (high cultural affiliation).
 - providing advocacy for patients unable to communicate well.
 - resourceful communication aids e.g. multi-language information cards and quick access iPads with incorporated language line (video service).
- Further study would aim to establish causation and recommendations for further reducing disparities.

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