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Human rights in UK maternity services: moving from observation to action

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By Leigh Ham

Human rights in maternity care is not a new concept. The Code (Nursing and Midwifery Council, 2018) states that the dignity, respect and human rights of all individuals should be upheld and, therefore, the human rights of those in our care should be central to everything that we do.[1] However, the growing body of evidence regarding the disrespect and abuse experienced during pregnancy and childbirth makes it an issue of global concern that demands acknowledgement, (World Health Organization (WHO), 2015).[2] It has been found that women worldwide, especially in areas of economic deprivation and developing countries, are being neglected, discriminated against, humiliated and exposed to both verbal and physical abuse.[3]

Human rights are also being violated closer to home, in developed countries such as the United Kingdom, United States and Australia. It can be argued that the abuse is more subtle and nuanced here, with women reporting coercion, lack of autonomy, being intimidated, and obstetric violence.[4],[5] In the United Kingdom, with its social preference towards institutionalised birth, women may find themselves within a stretched healthcare system, navigating medical paternalism that demands they 'act' in a certain way in order to conform to what is expected from 'a good mother'.[6] The result of this is that many may not even be aware that their rights are being violated. Unfortunately, society and culture often reinforces this. An example of this is seen in the representations of birth in the media, where women's rights, including their right to give full, informed consent without coercion, are largely ignored, thus compounding the problem.[7],[8]

My personal experience as a midwife and midwifery lecturer suggests that human rights in childbirth are not consistently upheld or discussed. I have witnessed numerous and wide ranging breaches and failings in my fourteen years as a qualified midwife. As a midwifery lecturer, I have listened to the accounts of student midwives' experiences during clinical placement where it was felt that human rights have been overlooked. In my teaching role, I have been afforded the opportunity to take a step back from clinical practice and truly reflect on my experiences, views and knowledge about this subject. Whilst it is a painful truth, I must acknowledge that there may have been instances where I have not fully considered the human rights of those within my care, even if I did not realise this at the time. I have always viewed myself as a 'good' midwife who is competent, kind and empowers others but, out of the clinical setting, I can reflect on being part of a culture where rights are sometimes neglected. AIMS' Position Paper on Obstetric Violence[9] brings this issue to the fore by acknowledging that many clinical staff may not be aware that their ingrained culture and day to day practices may be causing harm. They also recognise that staff need ongoing education, awareness and support, to take responsibility for and reflect on their practice, and to learn from past mistakes.

My experiences and understanding of this important subject have motivated me to focus on this topic as a postgraduate student. My research, a constructivist grounded theory study, will examine midwives' understanding of human rights in childbirth in different settings. My objectives are to explore midwives' perspective on their own role in regard to human rights, whether they believe human rights are respected in childbirth and how the environment in which they work promotes or obstructs their ability to uphold human rights. I believe that the reasons for mistreatment, much like midwives' understanding of human rights, are varied and complex. Understanding how midwives may balance the professional dissonance between the values and philosophy of the profession, and the factors which lead them to fail to challenge a lack of respect of fundamental human rights and dignity, is crucial if these issues are to be addressed. Phase one of my research is complete, with the completion of an online survey by midwives across the UK and Ireland; themes from this data will be used to inform semi-structured interviews. I believe that this research has the potential to contribute to midwifery knowledge and positively impact future care and services. Using my grounded theory, I hope to design and deliver an educational programme that will challenge and inform maternity staff. I also hope that it will influence midwifery education by helping to inform teaching around human rights issues and providing a context for students

to understand their future colleagues' understanding and implementation of human rights.

Author Bio: Leigh Ham is a Midwifery Lecturer at Swansea University who is undertaking her own postgraduate research into midwives' understanding of human rights in childbirth.

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[1] Nursing & Midwifery Council. (2018). *The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates.* London: Nursing & Midwifery Council.

[2] World Health Organisation. (2015). *The prevention and elimination of disrespect and abuse during facility-based childbirth.* WHO. Retrieved from: https://apps.who.int/iris/bitstream/handle/10665/134588/WHO_RHR_14.23_eng.pdf

[3] Bohren, M.A., Vogel, J. P., Hunter, E. C., Lutsiv, O., Makh, S. K., Souza, J. P., Aguiar, C., Saraiva Coneglian, F., Diniz, A. L. A., Tunçalp, Ö., Javadi, D., Oladapo, O. T., Khosla, R., Hindin, M. J., & Gülmezoglu, A. M. (2015). The Mistreatment of Women during Childbirth in Health Facilities Globally: A Mixed-Methods Systematic Review. PLoS Medicine, 12(6). https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1001847

[4] Vedam, S., Stoll, K., Rubashkin, N., Martin, K., Miller-Vedam, Z., Hayes-Klein, H., & Jolicoeur, G. (2017). The Mothers on Respect (MOR) index: Measuring quality, safety, and human rights in childbirth.*SSM - Population Health*, *3*(C), 201-210.

[5] Hall, W.A., Tomkinson, J., & Klein, M. C. (2012). Canadian Care Providers' and Pregnant Women's Approaches to Managing Birth: Minimizing Risk While Maximizing Integrity. Qualitative Health Research, 22(5), 575–586. https://journals.sagepub.com/doi/10.1177/1049732311424292

[6] Schiller, R. (2016). *Why Human Rights in Childbirth Matter.* Pinter & Martin.

[7] Einion, A. (2017). GUIDELINE COMMENTARY Midwifery and human rights: a practitioner's guide. *The Practising Midwife*, *20*(8), 30-32.

[8] Einion, A. (2019). 'Babies just popping out all over the place': an exploratory, theory-testing analysis of television birth narratives. *The Practicing Midwife, 22*(5).

[9] Association for Improvements in the Maternity Services (AIMS). (2021).*Position Paper: Obstetric Violence.* AIMS. Retrieved from: https://www.aims.org.uk/assets/media/729/aims-position-paper-obstetric-violence.pdf