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NHS charges putting pregnant migrant women in danger

Women are running away from antenatal units to avoid costs, putting their babies' – and their own – lives at risk, charity warns

Diane Taylor

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One pregnant woman says her husband is still paying off the bill for the birth of her last child, and she cannot afford to pay thousands more. Photograph: Martin Godwin

Pregnant immigrants are endangering their lives by disappearing from antenatal care to give birth at home because they cannot afford their NHS maternity charges, leading midwives have warned.

Some women are running away from antenatal units or giving false addresses and then turning up in labour with severe complications, putting their and their babies' lives at risk, the charity Maternity Action has found.

Thousands of women are thought to be affected by the NHS charges for care during pregnancy and childbirth that were introduced in August 2011 – the cost of which can run into several thousand pounds – although NHS guidance states this care is also deemed to be urgent treatment and should not be based on a patient's ability to pay.

Maternity Action conducted research based on interviews with 15 midwives and overseas visitors officers, who pursue payment from those who are not eligible for NHS care. All worked at London hospitals.

The charity found that hospitals interpret the charging rules differently. At some, overseas visitors officers come into antenatal units and are "vociferous" about chasing up payments; others adopt a less aggressive stance and give women a "shopping list of charges" so that they can buy some pregnancy or childbirth care from the NHS, but not the whole package if they cannot afford it.

The researchers heard the case of a woman who needed a caesarean for medical reasons, but who gave birth at home because she could not afford the charges. The midwives and overseas visitors officers told the charity that some women were not going to their antenatal appointments

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and were instead turning up in labour with severe complications.

The charity also heard that, in some cases, women had run away from antenatal care or given false addresses to midwives because they could not afford payment.

Janet Fyle, professional policy adviser to the Royal College of Midwives, warned that at some hospitals antenatal care was "going back to the dark days" and that midwives were being "used as immigration police".

Doctors of the World, which runs a clinic for migrants in east London, has seen more than 200 pregnant women who have not had antenatal care, either because they have been denied it or because they are scared of being charged. Eight of them were 36 weeks pregnant or more when they came to the clinic.

Phil Murwill, who runs the clinic, said: "By law, antenatal care should always be provided but we regularly see women who have been denied it, putting both mother and child at risk."

Ros Bragg, of Maternity Action, said: "We are in contact with a lot of midwives who tell us women are disappearing from antenatal care because they cannot pay for it. This is unacceptable. We are very concerned about the charging arrangements currently in place."

Susan Bewley, professor of complex obstetrics at King's College London, said the policy of charging migrant women for NHS antenatal care put pregnant women in danger.

"They may be put off accessing antenatal care that's good for them and their baby. If health professionals misinterpret their duties towards this group of women they might not come for scans, other checks or to deliver their babies," she said.

"We know that when women fail to access early antenatal care or any care at all, it can lead to poor outcomes for the mother and the baby.

"We live in a civilised society. It is dangerous not to look after pregnant women properly and not doing so reflects very badly on us all."

She said fear was "not good in pregnancy and especially not fear of the people who are supposed to be helping mothers and babies".

"It would be entirely unethical for doctors and midwives who serve the general public and the general good to say that there are 'deserving' pregnant women and 'undeserving' ones – that is corrupting for our professionalism," she said.

A Home Office spokesman said no woman should be denied access to maternity care as a result of their immigration status.

France, Spain, Italy, Belgium, the Netherlands and Portugal have some charges for healthcare for migrants but, unlike the UK, do not charge pregnant women for antenatal care or childbirth.

'We should be looking forward to the birth but I'm worried'

One pregnant woman who has fallen foul of the charging system is due to give birth at the beginning of January. She said she was terrified of going into labour because she was worried about being charged thousands of pounds she doesn't have for giving birth in an NHS hospital. She fears she may have to give birth without medical supervision to avoid this bill.

The woman, who cannot be named for legal reasons, has been living in the UK for eight years and has a British husband and child. She was charged more than £5,000 when she gave birth to her first child more than a year ago at Lewisham hospital in south London. Two other NHS hospitals have also asked for information to determine whether she should be charged for antenatal care.

"I have been stressed throughout this pregnancy and am very worried about how things are going to turn out," she said.

"My husband is still paying off the bill charged to us by Lewisham hospital for care during the pregnancy and birth. The baby I am carrying will be a British citizen when he or she is born but is missing out on NHS antenatal care because I have been denied it. We should be looking forward to the birth of our baby but instead we spend all our time talking about the way different hospitals are treating us. I am very worried about the health of



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the baby because I have not received proper antenatal care."

A spokesman from Lewisham and Greenwich NHS trust said: "We would never deny antenatal care to someone who is pregnant. However, government legislation states that the trust has an obligation to check if patients are entitled to free NHS care and to arrange for payment after treatment if necessary."

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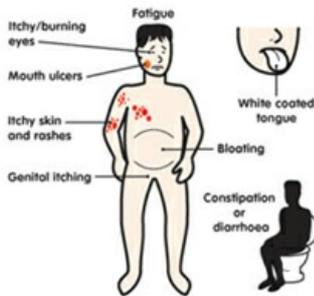
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