



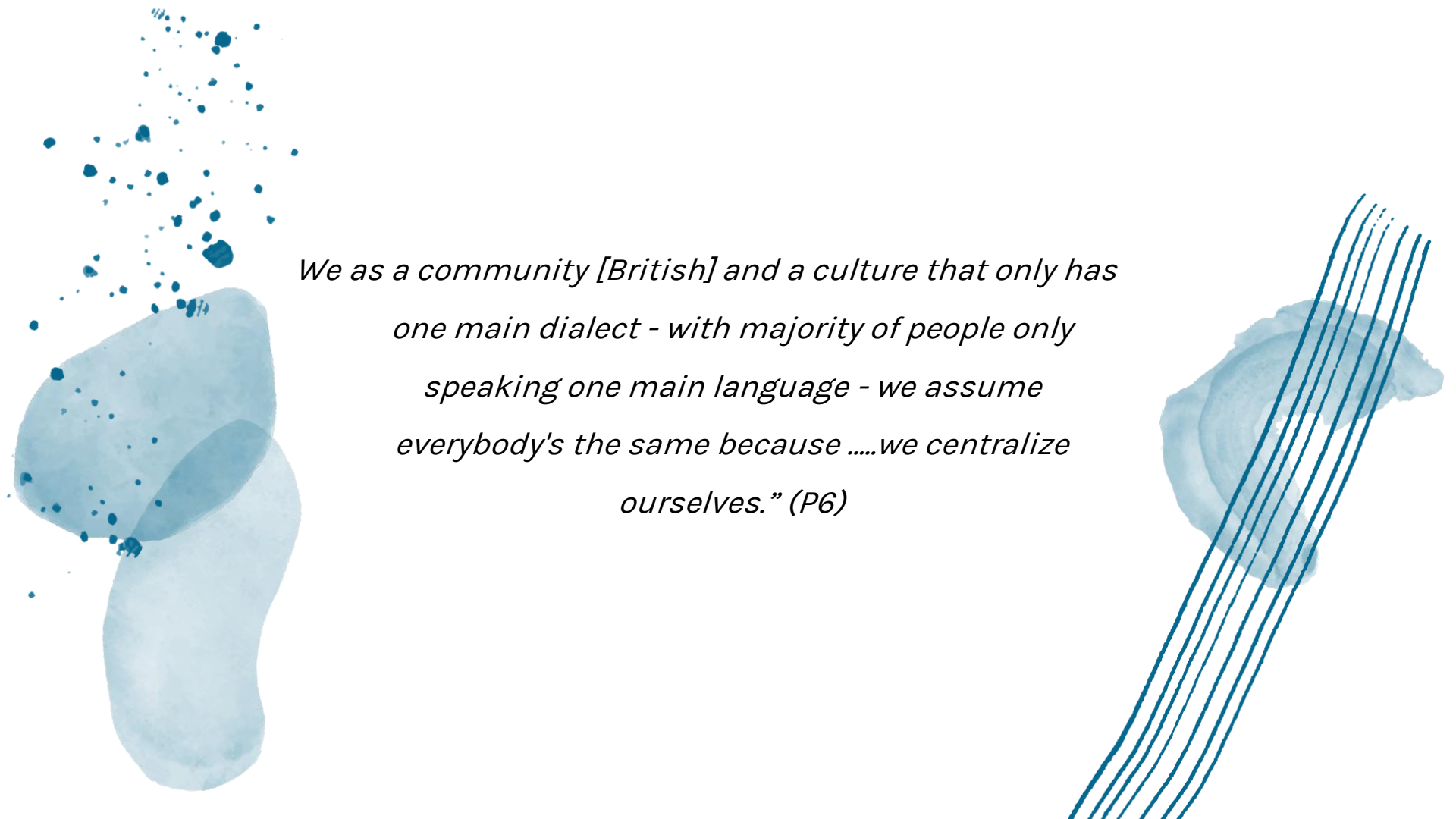
Multilingualism in healthcare: exploring the lived experience of maternity professionals

Dr Emma Brooks

“I grew up speaking a sort of mixed version of [languages] like an alphabet soup of Punjabi English and Hindi.” (P2)



The project was funded by an Impact Grant from UCL Department for Culture, Communication and Media 2021-2022.



We as a community [British] and a culture that only has one main dialect - with majority of people only speaking one main language - we assume everybody's the same becausewe centralize ourselves.” (P6)



Multilingual health consultations




Improved
comprehension,
experience and
outcomes



Improved sense of
well-being, comfort
and trust



Colleagues'
appreciation and
recognition of
patient benefits

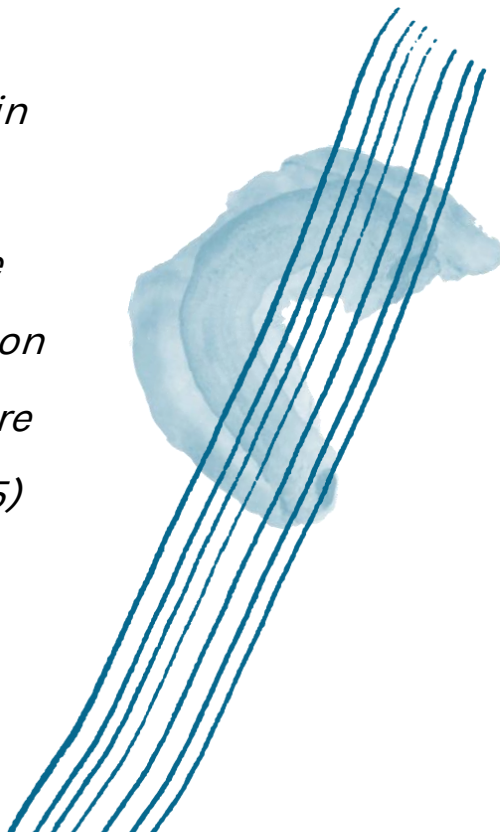


(Ali and Johnson, 2016; Cox, 2017; Lundin et al, 2018; Patriksson et al, 2022; Seale et al, 2022)



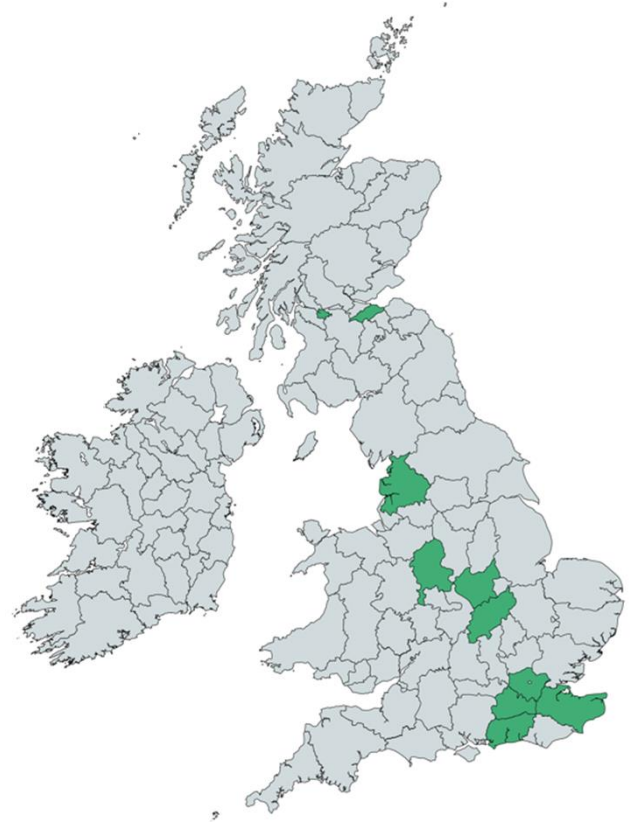
An international workforce

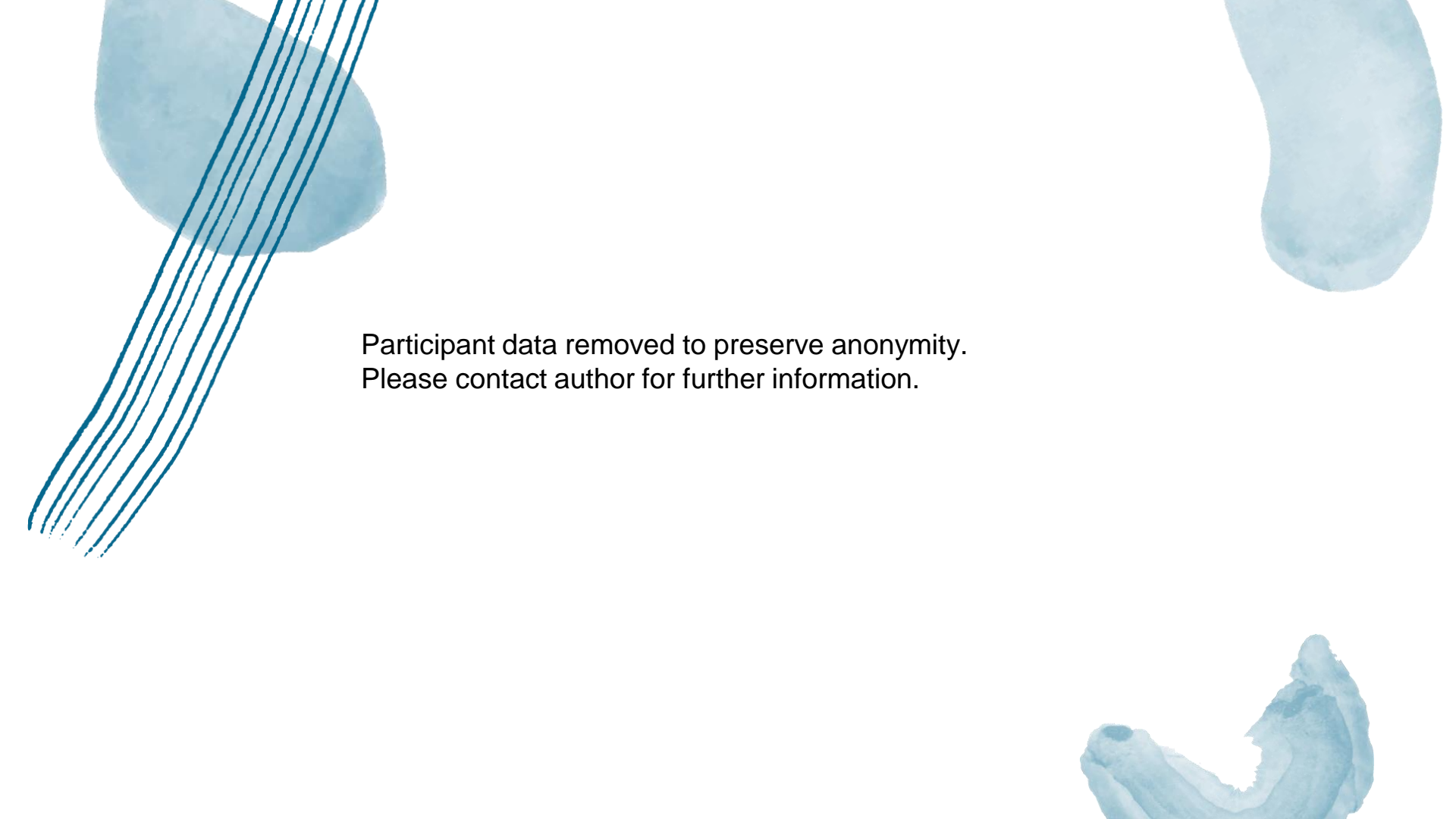
“We tend to collect doctors in little groups in the same way that you collect you know patients in little groups, so there are more Italian doctors and Greek doctors here than on average in the NHS in the same way there are more patients who are Greek or Italian.” (P5)



Methods

- Semi-structured interviews
- 9 different trusts
- 11 maternity professionals
 - Midwives
 - Consultant obstetricians & gynaecologists
 - Educators
 - International recruiters



The image features several abstract, light blue watercolor-like shapes scattered across a white background. In the top left, there is a large, irregular shape with several thin, parallel lines extending downwards and to the left. In the top right, there is a smaller, curved shape. In the bottom right, there is a more complex, layered shape. The text is centered in the middle of the page.

Participant data removed to preserve anonymity.
Please contact author for further information.

Specialism

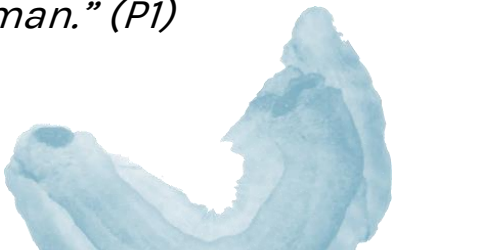
“In some ways it feels like.. a specialism in terms of what you're able to offer to the people you're working with and that you're caring for...just in terms of trust and relationship building, because often in maternity you know you're meeting someone and all of a sudden you're with them for the most intense.. frightening exciting rollercoaster.” (P7)





Professional (linguistic) pride

“I was the midwife looking after [a woman], the senior registrar also spoke Cantonese, the midwife coordinator also speaks Cantonese, and she went for a [caesarean] section and the anaesthetist also spoke Cantonese. It was like the universe aligned...it just so happened ...the day that you are admitted to hospital everyone on the unit speaks your language....honestly I don't think I'll ever forget that shift, where I thought it's like we all were here for this woman.” (P1)





Emotional connections

“So I started to speak to them in Urdu, and honestly you can just see in their face that relief that they can express themselves to somebody without having to think about what to say you know. There was that connection straightaway.” (P4)

Cultural brokering

*“Because I’m coming from outside and they’re coming from outside, I’m sort of a **bridge** between the home medicine in obstetrics, gynaecology and British one - they trust me.” (P8)*





(linguistic) reservations




*I'm good at French.
I'm good at
maternity. **Could I
translate you know
a liver transplant?**
Maybe not. There's a
limit to how far you
could stretch. (P5)*



*..When I was trying to
have conversations with
colleagues in Italy, like, I
**had totally blanked out
everything that I've
learned before** and I
could only use English
words to talk
about....instrumental
delivery. (P11)*



*I've learned my Punjabi,
**my Hindi very
conversationally with my
folks.** We don't talk about
vaginas.. we don't talk
about that stuff. I've had
to learnand so actually
being able to do a direct
one-to-one translation is
quite hard. (P2)*





A(n) (in)valuable resource

“I mean I one of the issues I have ..in the antenatal clinic where I workone of the healthcare assistants speaks Polish wellliterally every day she gets called at least twice a day to interpretI got so upset - like we are running a service, right? You know she can't be pulled away every time. ...they literally they don't even ask me. They just come and get her..... also, this is taking it away from the care she's delivering to the antenatal women.” (P11)




A(n) (in)visible resource

*I just thought it was like **targeting somebody because she's Italian** and she needs to look after them. So sometimes I think, they didn't even look at the case and what my expertise was (P11)*

*you don't get an uplift on your salary, because you can default to another language and offer **these servicesit is invisible** (P10)*

*Sometimes I know I'm not very okay with that I have to say: because **I feel I'm being used** yeah? (P3)*

*a lot of people are just doing it [interpreting], you know, to be kind to help out, and I think **I worry about it coming back to bite them** (P5)*



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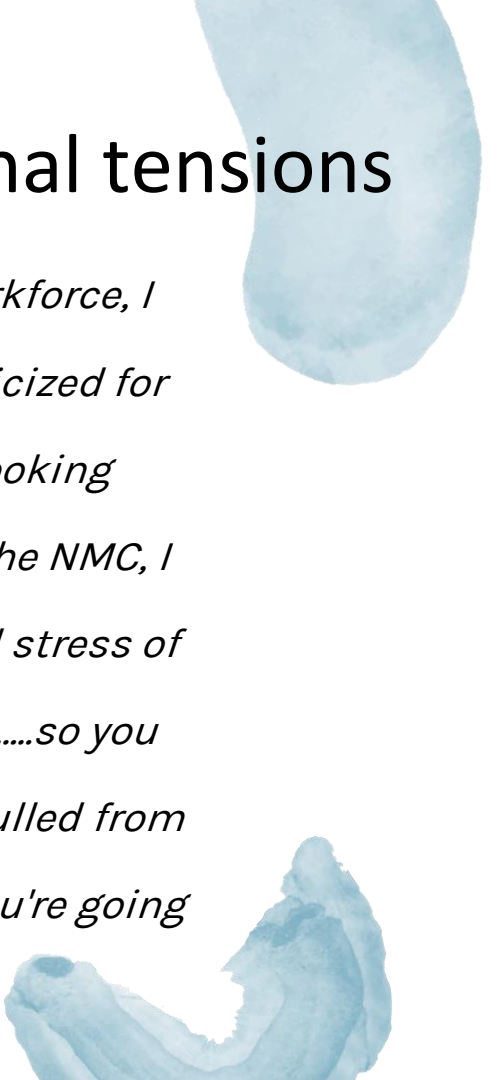
A (re)source of suspicion

“It’s about professional judgment really. I mean you have to trust I’m a registered health professional, you have to trust that I am going to have professional conversation in any language....obviously you would do it appropriatelyso it's very childish, I think, to say you can only speak English in the corridor, you can only speak English in the in the break room and I don't know how we culturally accept that.” (P10)



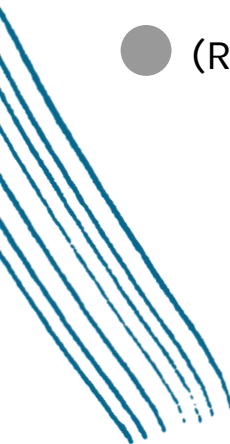
Institutional & intersectional tensions

“As someone who is Brown and working in the workforce, I know that I’m more likely to get picked up and criticized for my work if it’s not 150%. Because of me simply looking differently, I know I’m more likely to be referred to the NMC, I know I’m more likely to be disciplined. So the added stress of all of that adds pressure, but also wanting to helpso you know it’s that duality and issues with that.. being pulled from your work to support someone else, knowing that you’re going to get criticized for not doing your work.” (P6)





Future considerations

- Patient experience (Ali and Johnson, 2016; Cox, 2017; Lundin et al, 2018; Patriksson et al, 2022; Seale et al, 2022)
 - Institutional practices & invisibilised labour (Heller, 2007; Urciuoli, 2008; Hochschild, 2015; Heller & Duchêne, 2016)
 - (Re) thinking the multilingual experience (Pendleton et al, 2022)
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