

**Sands Briefing for Black Maternal Health Week**  
**Westminster Hall Debate, Grand Committee Room,**  
**2:30 pm on 29 April 2025**

### **Introduction**

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Black Maternal Health Week is an important opportunity to highlight and call for action to eliminate the persistent inequalities in maternity outcomes for mothers, birthing people and their babies.

No baby should have an increased risk of dying because of their race or ethnicity. However, stark and persistent inequalities in baby loss remain in England.

From the latest MBRRACE-UK data, examining UK perinatal deaths of babies born in 2022, Black babies were over twice as likely to be stillborn compared with white babies. Black and Asian babies are also over 50% more likely to die shortly after birth compared with white babies.

The latest data from ONS, published in April 2025, shows that in 2023, infants from the Black ethnic group continued to have the highest rate of infant mortality.

Sands have calculated that if, in the period 2017-2021, stillbirth and neonatal death rates for Black and Asian babies had been the same as for white babies, 1,704 babies would have survived.

The government must take urgent action and commit to tackling inequalities in pregnancy and baby loss. The commitment to close the Black and Asian maternal mortality gap is welcome. We are also calling on the government to commit to closing the Black and Asian stillbirth and neonatal death gaps.

### **Inequalities in pregnancy and baby loss.**

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In December 2023, alongside MBRRACE-UK's confidential enquiries into the deaths of Black and Asian babies, Sands published the Listening Project Report which heard the lived experiences of Black and Asian bereaved parents.

Half of the parents who took part believed that they had received worse care or been treated differently by healthcare staff because of their ethnicity. Black parents described how racist stereotyping assuming them to be 'strong', or 'feisty' or 'dramatic' had prevented professionals from recognising when they were at their most vulnerable.

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*“I think they just could not recognise in me actual fear. They just saw this feisty, strong, brown woman. And actually, I was so scared I couldn’t speak.” - Mother to a baby born at 26 weeks who died neonatally (Mixed white and Black Caribbean)*

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The report provided the following practical recommendations for the government:

- Set out long-term, funded plans aimed at eliminating inequalities in pregnancy loss and baby deaths.
- Ensure that maternity services have the staff capacity, skills and resources required to assess and care for women and birthing people effectively, so that the risk factors affecting each individual are recognised and their impact reduced.
- Initiating and funding a research programme to inform the development of effective interventions to address health inequalities and save babies’ lives.
- Take steps to ensure that all maternity safety improvements schemes include a focus on tackling inequalities, with action, progress and impact monitored.

The £50 million NIHR challenge to tackle maternal disparities announced in January 2024 is welcome. This research must inform the development of effective interventions to address health inequalities and save mothers and babies’ lives.

#### Questions to raise:

- **The baby loss charity Sands has calculated that if, between 2017 and 2021, stillbirth & neonatal death rates were the same for Black and Asian babies as white babies, 1,704 babies would have survived. Will the government consider designing a long-term, funded plan to eliminate inequalities in baby loss and save more babies’ lives?**
- **As part of their Listening Project, published in December 2023, the baby loss charity Sands spoke to Black and Asian bereaved parents about the maternity and neonatal care they received. Sadly, the report revealed alarming instances of racist stereotyping, behaviors and language. Will the Minister explain what action the government will take to challenge systemic racism in maternity and neonatal care?**
- **The government have already committed to closing the Black and Asian maternal mortality gap, will the Minister confirm if that commitment will include closing the Black and Asian infant mortality gap.**

#### Targets to eliminate inequalities

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Current maternity safety ambitions to halve the rates of stillbirth, neonatal deaths, maternal deaths and brain injuries and to reduce the rate of preterm birth end this year.

By 2022, the stillbirth rate was 23.5% lower than the 2010 rate and the neonatal mortality rate was 25.0% lower. Despite this initial progress, the rates of decline have stagnated more recently and are not on track to meet the ambitions. The Sands and Tommy's Joint Policy Unit has calculated that [1000 babies' lives may have been saved each year since 2018 if the ambitions had been met.](#)

The Sands and Tommy's Joint Policy Unit are proposing [the following](#) to replace the existing national maternity safety ambitions, with a deadline of 2035 to align with the 10-Year Plan for the NHS in England:

- A stillbirth rate of 2.0 stillbirths per 1,000 total births.
- A neonatal mortality rate of 0.5 neonatal deaths per 1,000 live births for babies born at 24 weeks' gestation and over.
- A preterm birth rate of 6.0% by 2035, with disaggregated data for iatrogenic and spontaneous preterm births.
- Eliminate inequalities in these outcomes based on ethnicity and deprivation.
- Establishing routine data collection on miscarriages should be prioritised. Once established, an ambition to reduce the miscarriage rate should be added.

It's essential that as part of renewed ambitions, a specific target is set to eliminate inequalities in these outcomes based on ethnicity and deprivation.

#### Questions to raise:

- **The Sands and Tommy's Joint Policy Unit have proposed new maternity safety ambitions with a deadline of 2035 to align with the 10 Year Plan for the NHS in England. Will the government commit to exploring how any new safety ambitions might include a new ambition to eliminate inequalities.**

#### About Sands

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At Sands, we work to save babies' lives and ensure that when a baby does die anyone affected gets the care and support they need. We provide bereavement and peer support to grieving families. We support and promote research to better understand the causes of baby deaths and save babies' lives. We raise awareness of baby loss and work with governments, the NHS and healthcare professionals to make saving babies' lives and improving bereavement care a priority.

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