**SUPPLEMENTARY FILE A: Ethnographic context**

This Appendix gives further qualitative interviews to add to the ethnographic lens.

A.1 Interview Excerpt: Dr Sarah Tade

“Dr Sarah Tade, birthed her first son Micah in 2022, but said she was ignored throughout the labour. “

"I felt failed by the midwives, because I did not have an identity - my voice was completely diminished.

How can you deny a pregnant woman in pain, not only do you refuse to provide the medication but you take away gas and air from them, the basic needs?

“I expressed that there had been a clinical change, I requested pain relief and this was not provided. I requested for the epidural, which was part of the Birth Plan - this was ignored.”

Source: ITV News: <https://www.itv.com/news/2025-07-21/i-wasnt-seen-as-an-individual-black-mother-shares-maternity-failure>

A.2 Interview Excerpt: The Bias Trap Insights

Sareena Rashid, and baby Zainab verdict death by natural causes.

"Even when there are guidelines, unconscious bias informs decisions - some women feel their pain is diminished or dismissed based on race, language and socio-economic status. When staff come in with prior assumptions of who is 'compliant' 'trustworthy', care is not delivered equitably."

"People like us should be able to hold on to more pain- Black, Asian and Minority Ethnic (BAME) have the threshold to hold onto pain. I'm on to shift change-over, nurses that were there overnight who are now off duty came over and actually stood over and said' that's not my problem, I am not on duty', and walked away.”

“Preparing c-section, mask on mother's face, forgot to switch on the oxygen- brain starved oxygen, she collapsed, she's having heart failure. The doctor delivers that baby- no trolley to put baby; doctor runs with baby in his hands to maternity ward.

Source: Southeast Clinical Networks- The Bias Trap: <https://www.southeastclinicalnetworks.nhs.uk/the-bias-trap/>