Black Birth Equity

In the U.S., childbirth is the top reason for hospitalization. Given the more than 3.7 million births per year, making pregnancy and labor safer and more supportive for birthing people is the key to advancing health equity. However, the U.S. maternal mortality rate related to pregnancy and birth is twice that of any other developed nation. And Black birthing people are three to four times as likely to die from pregnancy/birth-related causes and twice as likely to suffer a maternal morbidity (such as hemorrhage and infection) than those in all other racial/ethnic groups.

Evidence points to implicit bias and racism, not race, as key causes of disparities in maternity care and maternal outcomes for Black birthing people.

Compared to non-Hispanic white persons, Black birthing people are 92% more likely to be at risk for Severe Maternal Morbidity.

Black Birthing Disparities

1. Black infants are dying at a rate of twice that of non-Hispanic white infants, due to preventable pregnancy-related complications.

2. Black birthing people are also more likely to receive a caesarean birth and experience hemorrhaging or anemia during childbirth.

3. Black birthing people who are pregnant are affected across all walks of life, and these variations cannot be explained away by factors such as age, income, educational level, and health insurance status.

4. Evidence points to implicit bias and racism, not race, as key causes of disparities in maternity care and maternal outcomes for Black birthing people.

There are nearly 550,000 Black births in the U.S. each year, out of more than 3.7 million total births.
Black Birth Equity

Bias, Stigma and Racism in Health Care

- The health system consistently undertreats and dismisses Black Americans’ pain and symptoms compared to their white counterparts. Studies found that half of medical students erroneously believe in biological differences between Black and white patients.
- Medical providers tend to spend less time with Black patients and tend to lose contact post-partum.
- Mistrust in the health care system is also driven by historical injustices perpetrated by the health care system itself, like the Tuskegee Syphilis Study.

Black birthing people are less likely to pursue perinatal mental health care, due to stigma, lack of access, and not being provided screening tools. People of color are also insured at much lower rates than their white counterparts.

How can health care providers better serve Black birthing people?

1. LISTEN to birthing people—respond to their individual concerns and treat them as the experts of their own bodies.

2. BE OPEN to working with each patient’s support system, which may include a doula, midwife, family member, and/or close friend.

3. RECOGNIZE that challenging bias and racism in the health care system is long-term work that requires commitment inside and outside the examination room.

4. LEARN the warning signs of maternal morbidity and mortality, including trouble breathing, extreme swelling, and severe belly pain. These can happen during and up to a year after pregnancy.

5. SPEAK UP when you see instances of racism and prejudice among health-care colleagues, and at hospitals and other medical institutions.

6. EDUCATE yourself on how to recognize and interrupt your own implicit biases. Some states, like California, even have laws that require such training. And tools like the Diversity Science modules can help.

PERSONAL STORIES
- Kira Johnson
- Shalon Irving
- Serena Williams
- Beyonce