Maternal, Child & Adolescent Health





What is driving the persistent Black maternal and infant health inequities in California?

Structural racism drives poor health outcomes among Black birthing people and their infants through its impact on neighborhood conditions, chronic stress, and access to respectful care.

Black birth equity requires bold action

Racial inequities and unjust disparities in preterm birth, infant mortality, severe maternal morbidity, and pregnancy-associated death for Black people have persisted in California for decades. Too often, interventions aimed at improving Black maternal and infant health have excluded Black women's voices and have focused on individual risk factors and race, rather than on racism. This approach essentially blames Black women for their health outcomes.¹

To improve Black maternal and infant health outcomes and equity, we must work across sectors to improve the conditions in which Black people are born, grow, learn, live, and work. Black communities and Black experts should play key roles in developing these solutions. Progress will not be achieved by doing the same work, with the same voices at the table in the same way. We must collectively confront racism in order to make a difference for Black families and their children and to create a healthier California.





Centering Black Mothers in California elevates voices of Black women

By recognizing the powerful role of societal forces, *Centering Black Mothers in California* provides an expansive view of the health of Black mothers and infants in California. Black women played key roles in the development of *Centering Black Mothers in California* as co-authors and advisors. The report presents critical public health data using a framework that considers how structural racism shapes Black maternal and infant health. Quotes from Black birthing people remind readers of the personal stories behind the data.





How does structural racism impact Black maternal health?



Neighborhood conditions

As a result of historical discriminatory policies,² many Black Californians live in neighborhoods that are segregated and have high rates of poverty and unhealthy conditions, which can increase the risk of adverse birthing outcomes.



Chronic stress

Structural racism leads to chronic stress,³ which is linked to hypertension,⁴ a risk factor for severe maternal morbidity, pregnancy-related mortality, preterm birth, and preterm birth-associated mortality.



Lack of access to high quality, respectful care

In 2016, more than 1 in 10 Black women reported that they were treated unfairly or disrespectfully because of their race or ethnicity when giving birth.⁵

Key facts

- Black birthing people in California experience pregnancy-related mortality at three to four times the rate of other racial and ethnic groups.
- > The rate of severe maternal morbidity among Black women increased dramatically in recent years.
- The preterm birth rate among Black infants did not improve between 2011 and 2019.
- While the mortality rate among Black infants in California declined over the past decade, in 2018, Black infants were still twice as likely as other infants to die before their first birthday.

Read the full report to learn more about Black maternal and infant health in California at go.cdph.ca.gov/centering-black-mothers.

References

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- 4. Brondolo E, Rieppi R, Kelly KP, Gerin W. Perceived racism and blood pressure: a review of the literature and conceptual and methodological critique. Ann Behav Med. Winter 2003;25(1):55-65. doi:10.1207/ S15324796ABM2501_08
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