

ADDRESSING BLACK MATERNAL HEALTH DISPARITIES IN DELAWARE

May 2024



WOMEN'S
ADVANCEMENT
& ADVOCACY

Introduction:

Black maternal health disparities continue to be a pressing issue that demands urgent attention. Despite advances in healthcare, Black mothers continue to experience disproportionately high rates of maternal mortality and morbidity compared to their white counterparts. Addressing these disparities is crucial not only for promoting equity but also for supporting the well-being of mothers and their babies.

Key Facts:

High Maternal Mortality Rates:

Black women in the U.S. are three to four times more likely to die from pregnancy-related complications than white women.[1] This alarming disparity persists across all socioeconomic levels and affects women across age groups.[2] Delaware's Maternal and Child Death Review Commission (MCDRC) reviews all pregnancy-associated deaths, which include individuals that died while pregnant or up to one year postpartum, as a part of its Maternal Mortality Review (MMR). Of the eleven deaths reviewed in 2022, spanning a five-year period (2018-2022), 45% were Black women.[3] The MMR found the causes of death included drug overdoses (6), homicide (2), suicide (1), amniotic fluid embolism (1), and cardiovascular disease (1).[4] While all eleven women were pregnant at the time of death, only two deaths were directly related to complications with their pregnancy, while nine deaths were considered preventable by the MMR.[5]

Disparities in Chronic Conditions:

The largest and longest study on the health of Black women has been conducted through Boston University (28 years and counting and over 59,000 women). Results show "Black women are more likely than other racial and ethnic groups to die from cardiovascular disease, hypertension, stroke, lupus, and several cancers." [6] According to the Delaware Health Statistics Center, the leading causes of death for Delaware Black women include cancer (22.5%), heart disease (17.5%), and diabetes (3.4%), with cancer and diabetes deaths proportionally higher compared to the deaths of white women.[7] Additionally, the Delaware Pregnancy Risk Assessment Monitoring System (PRAMS) found that nearly two times as many Black women reported having Type 1 or Type 2 diabetes in the three months before pregnancy.[8] The PRAMS survey also showed that a higher proportion of Black women reported having hypertension, asthma, and anemia (three times as many Black women).[9] In addition to chronic conditions, according to the Delaware MMR, mental health and substance use disorder, particularly in cases where both are present, contributed to nearly half of the deaths that were reviewed by the commission.[10] A woman's health (both physical and mental health) and any chronic conditions that she may be experiencing, have a direct impact on her pregnancy. Access to healthcare and the social determinants of health are just two factors that are crucial to promoting healthy pregnancies and births.



A higher proportion of Black women reported having hypertension, asthma, diabetes, and anemia in the months before their pregnancy.

High Pre-Term Births and Infant Mortality Rates:

The Delaware Health Statistics Center provides the number and percentage of reported pregnancies in our state. The most recent data show that out of 12,104 reported pregnancies, 30% were Black women.[11] Prenatal care is vital to a healthy pregnancy, but KIDS COUNT in Delaware points out that fewer Black women begin prenatal care in their first trimester, suggesting possible challenges in accessing care.[12] Of the pregnancies that resulted in a live birth, Black mothers in Delaware experience higher rates of pre-term births and babies born with a low birthweight. Roughly 10% of live births in Delaware are pre-term (before 37 weeks); however, Black women account for a much high proportion of those births (37% of all pre-term births).[13] Furthermore, the percentage of babies born with a low birthweight (under 2500 grams), is nearly double for Black mothers compared to white mothers (13.7% vs. 7.1%).[14] Finally, in addition to these statistics, the infant mortality rate for babies born to Black mothers is more than three times the rate for white babies.[15] Regardless of the risk factors associated with infant mortality including the age, education attainment, and marital status of the mother, or the birthweight of the baby, Black women and their babies have disproportionately higher rates of infant mortality.[16] The striking disparities across the continuum from prenatal care to birth outcomes for Black women and their babies underscore the gravity of addressing Black maternal health.



30% of reported pregnancies, 37% of pre-term births, and 13% of low birthweight births are experienced by Black mothers.

Progress in Delaware:

Expansion of Doula Services:

In the current session of the General Assembly, legislators introduced or passed several bills related to doula services. The MCDRC recommends the expansion of doula services because of their positive impact on a woman's pregnancy and birth experience.[17] HB 80, which requires that doula services be covered by Medicaid in Delaware by January 1, 2024, was signed by Governor John Carney in August of 2023.[18] HB 345 and HB 362, both currently under consideration by the General Assembly, would expand doula services even further by requiring: 1.) Medicaid to cover postpartum visits with a doula (upon recommendation of a clinician); and 2.) that private health insurance plans would be required to cover doula services.

Healthcare Provider Training:

Healthcare providers should undergo training to recognize and mitigate implicit bias, cultural competence, and provide patient-centered care that respects the autonomy and dignity of Black women. During the 151st session of the General Assembly from 2021 to 2022, legislators passed House Substitute 2 for House Bill 344, which was signed by Governor John Carney in July of 2022. This legislation tasked the Delaware Perinatal Quality Collaborative with the development of bias and cultural competency training for healthcare employees.[19]

Community Engagement:

Community-led initiatives and grassroots organizations play a crucial role in advocating for Black maternal health. Engaging with communities to understand their needs and challenges is essential for developing effective solutions. In Delaware, the Delaware Healthy Mothers and Infants Consortium has a committee dedicated to black maternal health, and the Do Care Doula Foundation and Black Mothers in Power organizations are dedicated to eliminating health disparities and providing Black women with the resources and support they need to have a healthy pregnancy and birth.

Research and Data Collection:

Continued research on the underlying causes of Black maternal health disparities and comprehensive data collection are necessary to inform evidence-based interventions and monitor progress over time. In Delaware, the Delaware Health Statistics Center and the Pregnancy Risk Assessment Monitoring System, which are within the jurisdiction of the Delaware Division of Public Health, collect and regularly report data on pregnancy and birth outcomes. In addition to data collection, commissions like the Maternal and Child Death Review Commission (MCDRC) can use the surveillance data (along with other gathered information) to identify strategies addressing these disparities. You can read the most recent recommendations from the MCRDC [here](#).

Importance of Addressing Black Maternal Health:



Every woman deserves access to safe and equitable maternal healthcare, regardless of race or ethnicity. Addressing disparities in maternal health is essential for promoting equity and improving health outcomes for Black women and their families in Delaware. Healthy mothers can better care for their children and contribute to thriving families and communities. Investing in maternal health can also have significant economic benefits. Preventing maternal mortality and morbidity reduces healthcare costs, improves workforce participation among women, and fosters economic stability within communities. Furthermore, reducing racial disparities in maternal health is a public health imperative. It requires a multifaceted approach that addresses healthcare access, quality of care, social determinants of health, and systemic racism within healthcare systems. The social determinants of health including factors such as socioeconomic status, access to quality healthcare, education, and environmental stressors disproportionately impact Black maternal health. Addressing these social determinants is crucial for improving outcomes and reducing disparities.

Addressing Black maternal health disparities is not only a matter of equity but also a moral and public health imperative. By prioritizing the needs of Black mothers and implementing comprehensive strategies, we can work towards ensuring that all women can experience safe and healthy pregnancies and childbirths, regardless of race or ethnicity.

CITATIONS

- [1] Centers for Disease Control and Prevention. "Working Together to Reduce Black Maternal Mortality." (April, 2024) Accessed April 2024: <https://www.cdc.gov/healthequity/features/maternal-mortality/index.html>
- [2] Ibid.
- [3] The Delaware Maternal and Child Death Review Commission. "Annual Report" (2022) Accessed April 2024: <https://courts.delaware.gov/forms/download.aspx?id=195438>
- [4] Ibid.
- [5] Ibid.
- [6] Boston University. "Racism, Sexism, and the Crisis of Black Women's Health." (October, 2023). Accessed April 2024: <https://www.bu.edu/articles/2023/racism-sexism-and-the-crisis-of-black-womens-health/#:~:text=Black%20women%20are%20more%20likely,or%20have%20uncontrolled%20blood%20pressure.>
- [7] Delaware Health Statistics Center, Delaware Division of Public Health, "Delaware Vital Statistics Annual Report 2021." Accessed April 2024: <https://dhss.delaware.gov/dhss/dph/hp/2021.html>
- [8] Delaware Division of Public Health, "Delaware Pregnancy Risk Assessment Monitoring System (PRAMS) 2020 Analysis" Accessed April 2024 <https://dhss.delaware.gov/dhss/dph/hp/files/PRAMS2020.pdf>
- [9] Ibid.
- [10] The Delaware Maternal and Child Death Review Commission. "Annual Report" (2022) Accessed April 2024: <https://courts.delaware.gov/forms/download.aspx?id=195438>
- [11] Delaware Health Statistics Center, Delaware Division of Public Health, "Delaware Vital Statistics Annual Report 2021." Accessed April 2024: <https://dhss.delaware.gov/dhss/dph/hp/2021.html>
- [12] KIDS COUNT in Delaware, Annie E Casey Online Data Center. Accessed 2024: <https://datacenter.aecf.org/data/tables/11247-prenatal-care-by-race-ethnicity?loc=9&loct=2#detailed/2/any/false/2454,2026,1983,1692,1691,1607,1572,1485,1376,752/2639,3,13,438/21649>
- [13] Delaware Health Statistics Center, Delaware Division of Public Health, "Delaware Vital Statistics Annual Report 2021." Accessed April 2024: <https://dhss.delaware.gov/dhss/dph/hp/2021.html>
- [14] KIDS COUNT in Delaware, Annie E Casey Online Data Center. Accessed 2024: <https://datacenter.aecf.org/data/tables/4218-low-birth-weight-births-by-age-and-race-ethnicity-of-mother?loc=9&loct=2#detailed/2/any/false/2454/133,107|214/9716>
- [15] KIDS COUNT in Delaware, Annie E Casey Online Data Center. Accessed 2024: <https://datacenter.aecf.org/data/tables/570-infant-mortality-by-race?loc=9&loct=2#detailed/2/any/false/2454,2026,1983,1692,1691,1607,1572,1485,1376,752/217,2,1/9637>
- [16] KIDS COUNT in Delaware, Annie E Casey Online Data Center. Accessed 2024: <https://datacenter.aecf.org/data/tables/4224-infant-mortality-by-risk-factor-and-race?loc=9&loct=2#detailed/2/any/false/2026/271,272,273,268,269,270,280,282,281,283,284,278,279,277,276,275|2,1/9561>
- [17] The Delaware Maternal and Child Death Review Commission. "Annual Report" (2022) Accessed April 2024: <https://courts.delaware.gov/forms/download.aspx?id=195438>
- [18] Delaware General Assembly. House Bill 80-. Accessed April 2024: <https://legis.delaware.gov/BillDetail?LegislationId=130035>
- [19] Delaware General Assembly. House Substitute 2 for House Bill 344-. Accessed April 2024: <https://legis.delaware.gov/BillDetail?LegislationId=129729>

Contact OWAA:

Email: Delawarewomen@delaware.gov

Phone: (302) 220-8970

Follow us @Delawarewomen

www.de.gov/women