

Addressing the Crisis: A Look At Black Maternal Mortality Rates Through Equitable Healthcare

Dante Lawson
Northern High School

Introduction

Throughout America's history, there has been a long-standing disregard for Black communities within the medical field. As is evident in the way Black Americans are treated and cared for. Unfortunately, Black mothers are no exception. Many of the women in the Black community have near-death experiences because of the lack of respect for Black women in the medical field. According to the "CDC Equity Center," Black women in the United States are more than twice as likely to die during pregnancies as their white counterparts. Some of the most common factors that perpetuate these problems are birthing, and the associated risk, lack of affordable care in the area, and underlying disease affliction and prevalence.

Thesis: There is an unbalance of representation in the U.S. maternal mortality rates due to the higher disease prevalence, lack of affordability, and negative impact of the available birthing options.

Research Question: Which factors contribute to Black women's overrepresentation in the United States maternal mortality rates?

Methodology: I cited secondary quantitative sources for this study poster, including the National Institutes of Health (NIH), the Washington Tacoma Global Honors Program, JAMA, and peer-reviewed academic research from Massachusetts University School of Health. Additionally, medical associations such as the CDC and Sepsis Care Matters. Using these articles, I investigated the statistics of Black maternal mortality rates. Then the potential causes of this.

Key Words:

Preeclampsia - High blood pressure alongside kidney disease resulting from a pregnancy.

Sepsis - The result of the body attacking itself after an infection.

Hypertension - High blood pressure that can cause cardiovascular issues, fatigue, and headaches.

Maternal Mortality - The death of mother during or near the pregnancy.

C-section - Surgical delivery via an incision on the mothers abdomen.

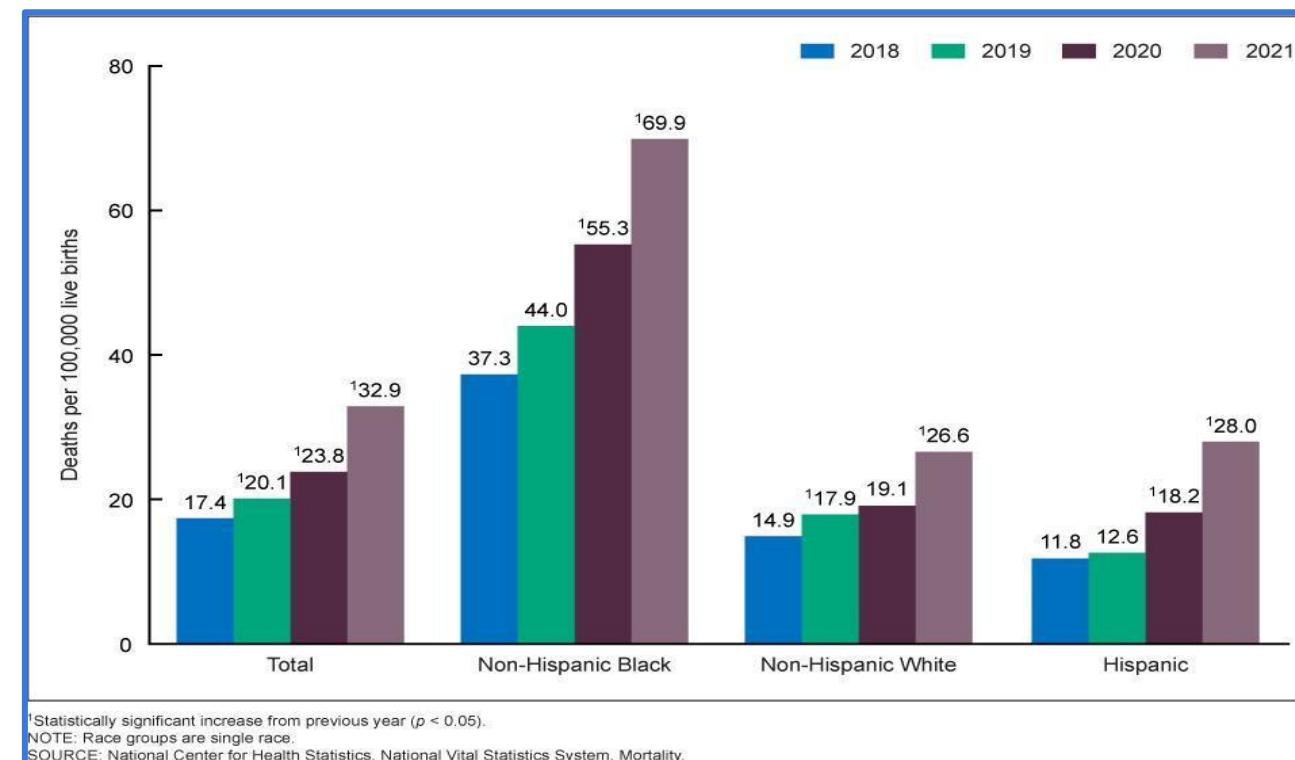
Background

The mistreatment of Black mothers has been an ongoing repercussion dating back to slavery, creating barriers in the healthcare system. More specifically, factors resulting from systematic racism and implicit bias contributed to Black women's higher maternal death rate (Njoku et al.). These factors include the devastating effects of chronic diseases. For instance, sepsis, according to an article entitled "Racial Equity in Sepsis Care Matters," Black mothers are over twice as likely to catch severe sepsis in comparison to their white counterparts. Alongside that is the way Black mothers give birth, according to the JAMA (Fink, "Trends in Maternal Mortality and Severe Maternal Morbidity During Delivery-Related Hospitalizations"), the C-sections have consistently led to higher maternal mortality rates. Finally, some states have as low as a death rate of 6 per 100,000 births compared to the opposite end of the spectrum reaching upwards of 120 per 100,000 deaths (JAMAs open study). This demonstrates a lack of income and affordability for healthcare.

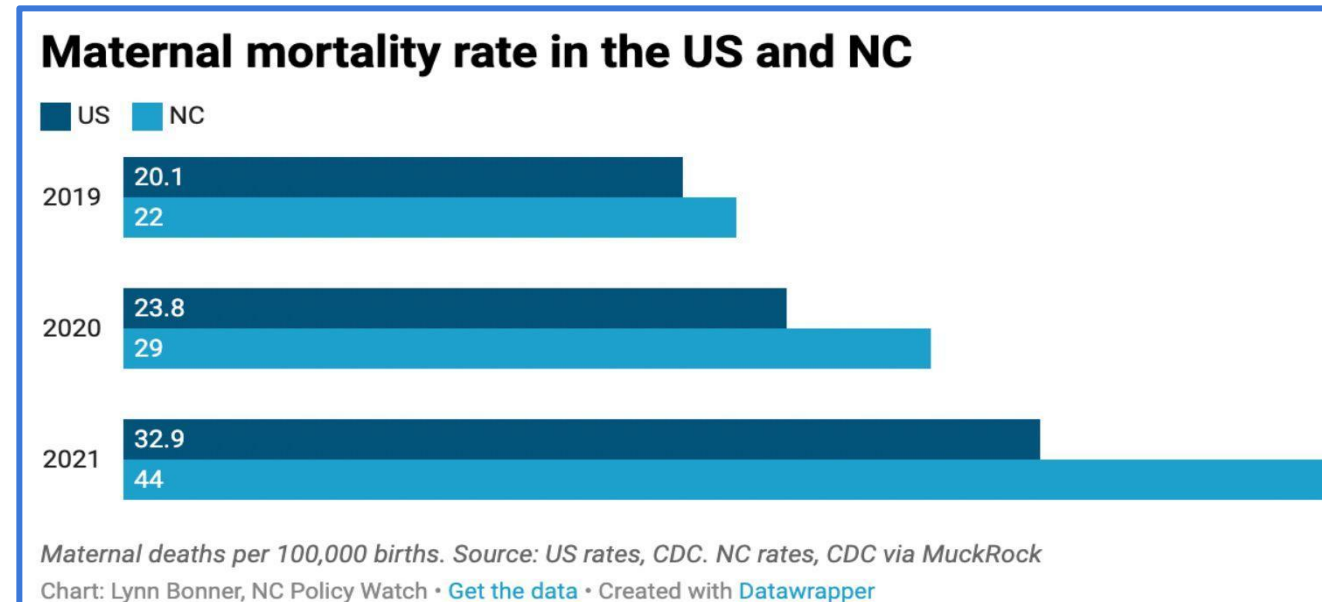


The graph is being used to emphasize how many Black mothers are dying in comparisons to their white and Hispanic counterparts.

Data Analysis



This graph is from the CDC and it details the mortality rates for mothers in the U.S. along the lines of years in which they died, what race the women were, and what exactly the rates were out of 100,000 live births.



This graph displays the mortality rate for mothers in the state of North Carolina and compares them to the mortality rate of mothers in the United States.

According to a JAMA observation (Fink, "Trends in Maternal Mortality and Severe Maternal Morbidity During Delivery-Related Hospitalizations") study, C-sections have consistently led to higher hospitalization maternal mortality rates since 2009.

UMASS research ("Science for Living: Understanding Preeclampsia, Its Toll on Black Women and a Promising Therapeutic on the Way") estimates that preeclampsia, a pregnancy-specific form of hypertension, causes maternal death at a rate nearly 4 times higher in Black women than white women.

Another such disease like hypertension was documented by the CDC as being present for 1/7 maternal hospital deaths during delivery. Especially in Black women, according to "JAMA Nativity-Related Disparities in Preeclampsia and Cardiovascular Disease Risk Among a Racially Diverse Cohort of US Women," Black mothers are 3 times more likely to enter with chronic hypertension

Results

In the results, according to the Journal of Clinical and Diagnostic Research (Fink, "Trends in Maternal Mortality and Severe Maternal Morbidity During Delivery-Related Hospitalizations"), it was found that the way pregnant women give birth, via C-section, has a definitive and measurable increase for death risk upon the mother. In Black communities, mothers are more likely to give birth, via the riskier cesarean birth option, leading to more deaths (Okwandu et al. Racial and Ethnic Disparities in C-section Delivery and Indications Among Nulliparous, Term, Singleton, Vertex, Women).

Chronic diseases that typical cause pregnancy related death are more seen in Black women proportionately by U.S. Department of Health and Human Services/Center for Disease Control and Prevention. Due to consistently worse socioeconomic status for Black women, they're more likely to enter the pregnancy with seemingly small diseases, however, the pregnancy can exacerbate leading to death.

Where those women give birth has been shown to have a correlation with whether they live or die. In a state with better healthcare, like Massachusetts, it consistently ranks in the top 10 for affordable health care states, the death ratio for Black women was nearly half that state with less than adequate health care, like North Carolina, that more aligns with the bottom third of the country as far as health care affordability.

Conclusion

The quantitative and qualitative secondary sources utilized for this project determined that birthing methods, underlying chronic disease, and the locational impact on affordable healthcare are all factors that significantly contribute to increased rates of Black maternal mortality. In this investigation, it was discovered that there were gaps in the literature that prevented more precise answers to the problems. However, this is not impossible to overcome, given that the quality of reporting and studying on this subject has significantly increased; providing high-quality healthcare everywhere can help mitigate this high fatality rate. The more this topic is researched the easier it becomes for precise and refined solutions for the many Black women at risk. Alongside the research, simple documentation and discussions on this issue make a difference. The more this issue is vocalized or written about in the media, the more awareness is spread. The voice of the people is one of the most powerful and useful tools. In conclusion, healthcare disparities affecting African American women are extremely prevalent in the United States, and that is simply unacceptable. This wrong must be corrected.