Welcome!

MATERNAL HEALTH INCUBATOR
MAY 24, 2022

HEALTH JUSTICE
IS THE PATH...

SO THAT EVERY COMMUNITY STARTS FROM THE SAME STARTING LINE!

IT'S MORE THAN THE CLINICAL
DR. ZSAKEBA HENDERSON | MARCH OF DIMES

WE NEED HEALTHY BIRTHING PEOPLE & HEALTHY BABIES
MANY DISPARITIES...

WE ARE FACING AN URGENT HEALTH CRISIS

LOCATION
RACE
DATA

COVID-19 HAS SURVEILLANCE ON BIRTHING PEOPLE & INFANTS IN REAL-TIME

SOCIAL DETERMINANTS OF HEALTH
- CO-MORBIDITY
- LONGITUDINAL

QUALITATIVE
- HOW/WHY BEHIND QUANTITATIVE DATA

CENTERING EXPERIENCE

WE NEED IMPROVED DATA COLLECTION

TAKE ACTION!

MORE EQUITABLE DATA COLLECTION PRACTICES

PREGNANCY & DELIVERY

MORTALITY

SHARE

INVEST

REMOVE BARRIERS TO ACCESS

SUPPORT STATE & LOCALITY-BASED DATA

MORE EQUITABLE DATA COLLECTION PRACTICES
PATIENT PERSPECTIVES
MODERATOR: DR. JOIA CREAR-PERRY

TENILLE S. LEAK-JOHNSON
ASS'T. PROFESSOR, PHYSIOLOGY,
MOREHOUSE SCHOOL OF MEDICINE

TRAUMATIC BIRTH EXPERIENCE
PREGNANCY LOSS
FURTHER DIAGNOSED WITH LUPUS
SEPARATION FROM NEWBORN - DIFFERENT HOSPITAL
MISDIAGNOSIS

RECOGNIZING & CELEBRATING SACREDNESS OF BIRTH
WE NEED TO BUILD THE VILLAGE

ALANNAH HURLEY
UNITED TRIBES OF BRISTOL BAY

PRE-ECLAMPSIA DURING HEIGHT OF COVID
RURAL PREGNANCY EXPERIENCE

BUT HAD AMAZING BIRTHING SUPPORT ORGANIZATION
2 MONTHS IN MATERNITY "HOUSE"

MARIAM AYDOUN
COMMUNITY ACTIVIST

MISSING OUT ON LACTATION EXPERIENCE
IMMIGRANT - AND PROUD WASHINGTONIAN

NURSE... CAN I JUST GIVE HER FORMULA?
I WISH I HAD COMMUNITY SUPPORT...
I WANTED TO HOLD MY BABY WHILE I GET A HAIRCUT!
I WISHED I HAD A THERAPIST I COULD TRUST
I KNEW MY INSURANCE DIDN'T COVER MENTAL HEALTH

I WISH I HAD THE SUPPORT PERINATAL POST-NATAL MENTAL HEALTH

LENHART LIMAN | DRAWING CHANGELING

AAMC CENTER FOR HEALTH JUSTICE
Panel Discussion: Leading by Example
May 24, 2022

Wanda Barfield
Director, CDC Division Reproductive Health

Equity in Data Collection

Disparities in Reproductive Health Across:
- Generations
- Race
- Education
- Nutrition
- Economic Status

Need to Understand Medical and Non-Medical Contributors to Maternal Mortality

Demonstrates Bias:
- Discrimination
- Interpersonal Racism
- Structural Racism

Full Picture Through Diversity—(Which we ensure in our committees)

Longitudinal
- Measuring Discrimination
- Telling the Stories Behind Data Points

Patient Voices

Hear Her Campaign
Racism is Not Biological Risk Factor—Social Construct

No One Should Die Giving Life

Panelists:

Eugene Declercq
Boston University, School of Public Health

Longitudinal

How to Ask Better Questions

Listening to Birthing People

You're Going to Have a Big Baby

Ex. "Big Baby" Myth
Actually Birth Weight is Going Down!

Info Has Domino Effect

- Tended to Self Induce
- Request Epidural
- All Actions After Being Told "Big Baby"

Need to Listen to Birthing People to Ask Right Questions!
LEGAL SERVICES TO IMPROVE MATERNAL HEALTH OUTCOMES

P-LAW = PERINATAL LEGAL ASSISTANCE & WELL-BEING PROJECT

ROXANA RICHARDSON
MEDICAL-LEGAL PARTNERSHIP DIRECTOR
MANAGING ATTORNEY PERINATAL LEGAL ASSISTANCE AND WELL-BEING PROJECT
GEORGETOWN UNIVERSITY HEALTH JUSTICE ALLIANCE

SYSTEMIC CHANGES
WE KNOW WHAT'S WRONG. BUT HOW TO MAKE THOSE STRUCTURAL CHANGES?

Q&A
BIAS IN DATA COLLECTION
WHAT QUESTIONS ARE ASKED MAKES HUGE DIFFERENCE IN OUTCOMES
LIKE REFERRING LOW-RISK PREGNANCIES TO MIDWIVES?
LIKE GIVING HCPS MORE TIME WITH PATIENTS?

STOP SEPARATING MATERNAL AND INFANT HEALTH

MENTAL HEALTH SCREENING
POST PARTUM VISITS
HEALTHY BIRTHING PEOPLE MAKE HEALTHY BABIES

HOW TO CONNECT DATA TO RESOURCES AND ACTION?

ACTION
DATA
RESOURCES
PREVENTATIVE CARE
MENTAL HEALTH
LEGAL SUPPORT
SDOH
SCREENING VISITS ASKING THE RIGHT QUESTIONS
80% Positive Birthing Experience

In Spring 2022, AAMC Center for Health Justice conducted a poll of 1206 birthing people.

20% Fair or Poor Experience

66% experienced postpartum complications (of all birthing people).

37% experienced bias and discrimination

More likely to report if:
- Non-Hispanic Black
- Gen Z
- Lower income
- LGBTQ+

Mental health concerns were the most reported complications.

30% were never screened for mental health.

Low income
Gen-Z
LGBTQ+
Rural

Logan Burdette, Health Policy Intern, AAMC Center for Health Justice
May 24, 2022
IMPACT OF COVID-19 ON BIRTHING PEOPLE

62% INELIGIBLE FOR VACCINE WHILE PREGNANT

OF THOSE ELIGIBLE, BIRTHING PEOPLE MORE LIKELY TO BE VACCINATED WERE
- Hispanic
- College educated
- Higher income

COMMON THEMES:
- No visitors allowed
- Fear for child's health
- Lack of social support
- Limited access to doctors
- Difficulties with work and finances

"The pandemic started when my baby was very small... Not knowing many things about my postpartum... It was difficult."

"I had to give birth with a mask on and no visitors... That broke my heart."
Panel Discussion: Implications for Policy
May 25, 2022

How do we ensure the right people are at the table?

People closest to problem hold the solution.

Words matter when partnering with communities.

Access:
- You will only know what this means by asking the community.
- Numbers—magnitude, stories—why and how.

Culturally Relevant:
- Especially when addressing mental health.
- Demonstrated racial health disparities could only be explained by structural racism.
- COVID.

Where do we start?

Starts in medical schools.

We need to blow the curriculum up!

What do we need to consider in legislation?

Data
Equity

Collection
Use

Interpretation

Build & Grow Perinatal Health Professionals

Midwives
Dallas
Birth Centers

While hospitals sort themselves out!

And, yes we need to work with and through the system.

Recognizing racism in the system without villainizing the system.
Let's talk Access-Policy, Regulation

Racism in the System!

We need to talk through the nitty-gritty of these systems.

Cross-sector Collaboration?

- Govt-Fed & State
- Employers
- Educational Institutions
- Private Insurance
- Hospitals

Give birthing people full agency to articulate what equitable access looks like.

Also need to look at established health care professionals with "old ways of thinking" who are training new residents.

Power

Education

Community

Health Systems

Lean in to knowledge that's existed for generations!

Birthwork is family work.

Including LGBTQ+ birthing people in the room:
- Listen with humility
- Lean in and learn
Welcome! May 25, 2022

Daria Grayer
Senior Lead Specialist, Science Policy & Regulations, Scientific Affairs
AAMC Center for Health Justice

We need to get to action
Advancing Maternal Health Policy while addressing racial inequity

State and Federal Policy
Key Issues Framing Today

☐ How policy makers & legislators can use evidence to move swiftly to address maternal health and mortality

☐ How communities can co-develop policy & legislation

☐ Expanding maternal health research funding to community organizations

☐ Collection and evaluation of data (individual & longitudinal studies)

☐ Access to maternal care

☐ Diversification of healthcare workforce

☐ Postpartum insurance coverage and paid leave

Remarks:
Sharice Davids
U.S. Representative, KS
One of 1st two Native American women in Congress!

Data to Save Moms Act

We are facing a crisis of maternal health in the U.S., especially black and indigenous birthing people dying 3-4x higher than white counterparts.

Frankly, it's shameful.

Community engagement in maternal mortality review committees
Improved data collection of minority-serving institutions
1st study Native American maternal health crisis