

Lowering the Rate of Maternal Mortality of
African-American Women in Pittsburgh:
Women's Health Advocacy Program

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Introduction

The purpose of the proposal is to create a program that will improve the quality of maternal care among black women in Pittsburgh and reduce the frequency of maternal mortality. As a minority, African-Americans are subject to racial discrimination that prevents them from receiving fair and affordable prenatal care. This paper will explain the severity of maternal mortality in Pittsburgh and a plan to reduce the number of maternal deaths through the creation of a doula program that will allow more maternal care options to be made available for pregnant women.

Despite living in an extremely advanced country, maternal mortality rates in the United States are much higher than they should be. In Pittsburgh, black women do not receive the quality of maternal care that is necessary in order to promote health in both the mother and the newborn. There is a widening gap based on race, the access and affordability of maternal care that is negatively affecting black women across Pittsburgh.

According to a report from the Gender Equity Commission, “Black women in Pittsburgh are more likely to die during pregnancy than their peers in 97 percent of U.S. cities” (Davis). This means that just by leaving Pittsburgh, black women could improve their maternal care. In order to prevent these deaths, reform must be made.

If the University of Pittsburgh created a Women’s Health Advocacy major within their School of Public Health that allowed participants to graduate with background knowledge in patient advocacy, in addition to becoming a certified doula, they could partner with UPMC’s Magee-Women’s Hospital and local clinics to allow their students to gain clinical experience and help provide care. This program would increase the options for maternal care for black women in

Pittsburgh and could dramatically lower the number of deaths that occur during and after pregnancy.

Literature Review

Pregnant women born in the United States experience much higher rates of maternal mortality in comparison to pregnant foreign-born women (Singh). In addition to higher rates of maternal mortality, U.S.-born black pregnant women are more likely to partake in risk behaviors that can negatively affect the outcome of their pregnancy when compared to U.S.-born white pregnant women.

Black women suffer from worse maternal care in comparison to their white counterparts. Oftentimes, these negative health outcomes can be attributed to higher rates of poverty, lower levels of education, and an increased likelihood to participate in risk behaviors while pregnant. However, even in the case of black and white women who have the same age, education, and economic factors, black women still have a 24% higher maternal mortality rate (Tanner).

According to a study completed by the National Institute of Health, a lack of education is most directly attributed to a higher maternal mortality rate (Freese). If women are not educated enough, they may not be equipped to make informed decisions about their maternal care. This can contribute to lower quality care and increase their risk for maternal mortality.

A doula is a childbirth support professional that begins to care for patients during their pregnancy and often helps to deliver the child (Everson). Although they are a comparatively less popular form of maternal care for pregnant women, doulas are continuing to gain recognition for the emotional support they provide their patients. Research has shown that pregnant women who use doulas have a more satisfactory birth experience and are less likely to have a cesarean birth (Bohren). Despite the fact that doulas often improve the quality of maternal care for pregnant

women, only 36.8% of black women have knowledge about doulas, in comparison to 85.7% of white women (Sperlich). Because women with an education are more likely to have heard about doulas, it is important that doula care is made available to more black women, as would be the case if the Women's Health Advocacy Program was in place.

A program created by the New York City Department of Health and Mental Hygiene that provided free doula services to communities throughout Brooklyn resulted in lower rates of preterm birth and lower rates of lower birth weight (Thomas). These communities, which were mostly made up of black and brown women, provided doulas for individuals who normally would not have been able to afford to seek alternate methods of maternal care. The Maternal Health Advocacy Program would allow doulas to collaborate with physicians in Magee Women's Hospital so that women receiving maternal care in that facility have more options for their healthcare.

In addition to being informed about labor and delivery, having a healthcare provider that can advocate for the patient is also increasingly important for women of lower socioeconomic status who may not have obtained a very high level of education. According to a study published by the American Journal of Public Health, social workers have shown to increase the amount of positive outcomes in healthcare (Steketee). Since the doulas that would graduate from the Women's Health Advocacy Program would also have completed a curriculum that included classes from the Department of Social Work, they would be equipped to take on the role of an advocate when caring for pregnant women, and subsequently help them make informed decisions about the type of maternal care they wish to receive.

Due to the high frequency of maternal mortality amongst the black population in Pittsburgh, along with the known benefits that come with social workers and doulas that are a

part of maternal care for women, a program that provides doulas with a patient advocacy educational background could help to improve maternal health outcomes.

Background Work

Providing emotional support and non-medical care to pregnant women is a valuable profession. A doula is trained to supplement the care given by OB-GYNs. The professionals need to receive extensive training in order to become certified as a doula. In essence, we need to analyze what it takes to become an effective doula. Notably, one has to attend classes and become competent. It can take six months to a year to become a certified doula. Doulas collaborate with other healthcare professionals to achieve the goal of safe delivery for all pregnant clients.

In addition to doula classes, the Women's Health Advocacy program curriculum will include some classes that already exist within the University. Classes that are already offered by the School of Public Health like "Public Health Approaches to Women's Health," which covers health and social problems relating primarily to women and "Ethnicity and Social Welfare," a class already offered by the School of Social Work because to become an effective doula, one will need to gain skills in working respectfully and competently with diverse populations. These are just a few classes among others like "Child and Family Advocacy," and "African-American Health Issues." These are all classes that will equip students in the program to be effective advocates as well as doulas. Clinical experiences will be created specifically for the program in collaboration with UPMC's Magee-Women's Hospital and local health clinics in diverse communities such as the East End Community Health Clinic and the Wilksburg Family Health

Center, that involve hands-on training that helps pregnant women through pregnancy, childbirth, and the postpartum period. They will also learn about prenatal health, preparation for childbirth, and getting a woman through a safe delivery.

Promotion

The Women's Health Advocacy program's initiative is to positively impact community health. Pregnant women can be invited to receive doula care at their prenatal appointments. Brochures can be distributed to patients directly by OBGYN doctors. Doctors at the local clinics would also inform their patients of the program to offer low-income women the opportunity to receive well-rounded maternal care. This would allow pregnant black women in Pittsburgh to become educated on the importance of doula services during pregnancy. An informational brochure could be useful for the women who needed an extensive explanation of doula care. The University of Pittsburgh would also be promoting this program to incoming students which would increase community awareness. It is paramount that the knowledge gained through doula care improves the health of both the unborn child and mother.

Support Team and Collaborations

In order for Pitt's Women's Health Advocacy program to be successful, there must be a coalition of resources within the academic and health-care community. The program would be made within the School of Public Health, combining a curriculum from the courses of nursing, social work, psychology, and public health. An executive board would also be comprised of professors and other faculty to help organize and facilitate the Women's Health Advocacy Program. The collaboration between UPMC Magee-Women's Obstetrics and Gynecology Department for our doulas is integral to the program, as students will be fulfilling their clinical

hours at this hospital. A partnership with community and local women's health clinics such as the East End Community Health Clinic and the Wilkinsburg Family Health Center will allow students to gain clinical experience and help provide care.

Resource Allocation

Given the \$1.2 million dollar grant, we propose a practical budget that elapses a 4 year trial era and incorporates outside fees paid by students. First, we would like to establish that students will be charged tuition fees and other expenses that are necessary to attend the university. The tuition that students pay will cover the cost of professors. We plan to hire 16 professors specific to the Women's Health Advocacy program with an average of \$62,500 salary, thus a faculty budget of one million dollars. To meet this need we will need a class consisting of at least 30 in-state students (tuition being \$20,000 per year) and 30 out-state students (tuition being \$30,000 per year) with a class cap of 80 students in total. That will allow the student to faculty ratio for the program to be 5:1 and the lowest possible profit to be \$1,100,000. We have taken into consideration the need for financial assistance and the ability to provide opportunity for diverse backgrounds, therefore we plan to supplement scholarships. Altogether, we plan to provide \$800,000 in 4-year renewable scholarships. This will be broken down to recipients of four \$20,000, six \$10,000, and twelve \$5,000 scholarships. Hopefully, these rewards will draw applicants to apply; however, we will also provide a \$100,000 advertising budget allocated to the University to help bring students in. Lastly, we will designate \$200,000 to purchase equipment and ensure classroom placement and building rental. The remaining money from the award and excess tuition will be split between a scholarship relief fund and a safety net.

Benefit to the Community

This program thoroughly invests into the community and is a great initiative that could be beneficial for a long amount of time. It is evident that the mortality rate for black women is unreasonably high. It has also been established that Pittsburgh is a segregated city that is not the best environment for black women to live in. Although the Women's Health Advocacy program is focused on the health and mortality amongst black women, it can be useful to address these other ongoing issues in Pittsburgh. First, this program is providing scholarships to lower-income or local black members of surrounding communities. Applicants outside of Pittsburgh and non-black students can still apply for scholarships, though priority will be given to minority applicants. By providing scholarship to students, it gives them the ability to have an affordable education, resulting in a greater advancement in life(Dougé). By getting a degree this will provide the opportunity to improve the life of individual applicants, their families, and communities. "An inclusive learning environment that promotes diversity can help to foster a more equitable society"(Dougé).Beyond the educational advantage that is warranted by scholarship, the program will supply the demand for prepared and diverse representatives in health. The Women's Health Advocacy degree is giving protection to black and underrepresented women in health. This will help to ensure the safety of procedures and attention to women that need it. In result, a greater number of healthy children and mothers will live. The advocacy and protection of these women may result in an influx of the population due to a decreased mortality rate and the relocation to Pittsburgh(Robinson). If black women feel safer in Pittsburgh they will start to move and start their families here. This will attract more business, tax revenue, and diversity to the city, resulting in more homes being bought, more people going to schools, more jobs, and more interactions between different types of

people(Triana). If the atmosphere of Pittsburgh adapts to be more inclusive through the migration here, this can lead to more integrated communities. The benefits that may result from the program will not be instant and may not be a grand scheme domino effect, but it will benefit the lives of women that are being advocated for and babies that live to contribute to the world.

Sustainability

Our initiative is sustainable to the community and to the benefits of The University of Pittsburgh as it will help to improve health outcomes, lower the maternity mortality rate, and help Pitt to directly assist local communities and reach their diversity goal. A program like this, alongside its competitive and preparatory nature, will create interest and provide a greater influx of students to apply and attend the University. Therefore, the satisfactory results will provide an opportunity to pay for itself though time. With the affiliation and partnership to UPMC there is room for potential partnerships in scholarship and research that may extend to mandatory course programs for employees or endorsements by their faculty. Through the success of the program it may become renowned for its expertise and distinctive qualities, attracting donations and investments to the program. Beyond the direct impact of the University it can produce a greater life for Pittsburgh through academic excellence and protection. Overall, it will bring more diversity and money, with more college graduates and safer practices that can build up the city, inspiring the creation of programs outside of Pittsburgh. A program like our Women's Health Advocacy program can become a legacy for Pittsburgh and the considerable amount of money they contribute initially will be miniscule compared to the benefits that will be procured after its success.

Public Health Impact

We hope that the Women's Health Advocacy program will help to improve health outcomes for pregnant women in Pittsburgh, lower the maternal mortality rate, help Pitt to directly affect local communities and reach their new diversity goal, and that it will create trust between healthcare providers and patients. The nature of this program will have an inherent impact on the public health of Pittsburgh, as it integrates advocacy and resources for at-risk pregnant women, along with education on alternative birthing options. In addition, a new and highly trained sector of the health care community can now be implemented to assist OB-GYNs. This should also improve the livability of Pittsburgh for black women, improving pregnancy, the birthing process, and the postpartum experience. Focusing care and attention to historically underserved and marginalized communities with appropriate interventions, such as culturally competent doulas, should help reduce maternal mortality in Pittsburgh. The impact of doulas are proven to be significant and successful in increasing the health of the mother and baby and decreasing negative outcomes. In the Journal of Perinatal Education, the article "Impact of Doulas on Health Birth Outcomes" states that "doula-assisted mothers were four times less likely to have a low birth weight (LBW) baby, two times less likely to experience a birth complication involving themselves or their baby, and significantly more likely to initiate breastfeeding. Communication with and encouragement from a doula throughout the pregnancy may have increased the mother's self-efficacy regarding her ability to impact her own pregnancy outcomes" (Gruber 2013). As noted in the podcast "This Racism is Killing Me Inside," the systemic racism and threat a Black woman encounters once becoming pregnant today in America is a "national disgrace."(NPR). The public health goal is to contribute more protection, alliance, and empowerment, which in turn helps nurture health.

Conclusion

Even though the United States spends more money on healthcare when compared to other developed nations, the national maternal mortality rate is still extremely high. In Pittsburgh specifically, black women are much more likely to die during pregnancy, during childbirth, and during the postpartum period than their white counterparts (Tanner). This remains true even for women of the same socioeconomic background. This means that a lack of cultural competency and implicit racial bias most likely contribute to poorer quality maternal care for black women. In order to remedy this issue, the Women's Health Advocacy program hopes to create a number of racially diverse doulas that have an education in patient advocacy to accompany black women throughout their pregnancy and advocate for them.

This program will exist within the Department of Public Health at the University of Pittsburgh and will include partnerships with UPMC Magee-Women's Hospital and local clinics to ensure that women of diverse socioeconomic backgrounds are able to get access to doula care. The grant money will go towards scholarships that will encourage students of color to join the educational program. The tuition money funded by the grant will help to pay the salaries of the faculty members hired in order to run the program.

In addition to benefiting the women who receive the doula care, the University will also benefit because it will help them to gain more diverse students and faculty, and will also be a unique program that may draw students from around the country to attend. This program would also be creating collaborations between a local hospital and local clinics to improve the quality of care for their maternal patients. Because doulas offer emotional support for pregnant women, they are a great addition for women who may not be receiving the quality of maternal care

necessary. The Women's Health Advocacy program will lower the maternal mortality rate and make Pittsburgh a more liveable city for not only black women, but all of its residents.

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