

Pregnancy-related Health Disparities for Black Families

Many Head Start families, including Black families, may experience health disparities, defined as differences in health outcomes based on race, economic status, or other factors. Health disparities may be the result of not having access to resources, such as healthy food, safe neighborhoods, or preventive health care.

Black families may face health disparities related to higher rates of poverty and less access to health insurance and quality health care services. They may also experience discrimination or racism that affects their health outcomes. For Black people, increased chronic health conditions caused by the historical and ongoing trauma of racism may also result in health disparities.

One area with major health disparities is birth outcomes. The United States has the highest maternal death rates of any wealthy nation in the world, and Black pregnant and postpartum women and people and babies have the highest rates of death. They are more likely to die because of a long history of inequality often referred to as systemic oppression. When unfair systems target certain populations, it is considered systemic racism. Systemic racism has a big impact on maternal health outcomes in the United States.



Weathering

The cumulative life experiences of racism and other forms of oppression have a profound impact on the physical and mental health of Black people. This is known as weathering, and it can lead to premature biological aging, leaving Black pregnant women and pregnant people at higher risk for conditions that pose a risk for maternal death, such as preeclampsia, eclampsia, and embolism.

Note: This document uses the term “pregnant and postpartum women and people” to refer to anyone who gives birth, regardless of their gender identity, which may be female, male, nonbinary, or other. For more information about inclusive language, read [Exploring a Nonbinary Approach to Health](#).

Racial Disparities in Birth Outcomes for Black Pregnant and Postpartum Women and People

Black pregnant and postpartum women and people experience stark racial disparities in birth outcomes. For example, they are:

Three times

more likely than white women to die of pregnancy-related causes. Black infants are more than twice as likely as white infants to die before their first birthday.



More likely to have **preterm births**, low birthweight births, or births for which they received late or no prenatal care compared to white women.



Black women and people who receive pregnancy-related care late in a pregnancy or not at all and those who receive **racially biased** care are at an increased risk of pregnancy complications.



More likely to be admitted to the **intensive care** unit during delivery compared to white women.

Two to three times

more likely to die than white women who had the same five medical complications that are common causes of maternal death and injury.



More likely to experience problems during pregnancy and birth, even when they have higher education and income levels.



Black women with a college degree had **worse maternal and infant birth outcomes**

than white women who never graduated from high school.



Less likely to receive routine medical procedures and more likely to experience a lower quality of care. Studies show that having a Black doctor care for Black women and people and their babies results in fewer deaths of Black infants.

Racial Bias Plays a Role in Maternal Deaths

[Maternal Mortality Review Committees](#) (MMRCs) are multidisciplinary committees in states and cities that perform comprehensive reviews of deaths within a year of the end of a pregnancy. MMRC members have reported that bias and discrimination play significant roles as contributing factors leading up to maternal deaths.

How Head Start Programs Can Help

As many as eight out of 10 pregnancy-related deaths are preventable. Head Start services can address pregnancy-related health disparities by recognizing the role of structural and systemic racism and discrimination in contributing to worse health outcomes for Black families. Despite these challenges, culture and tradition are protective factors that support the resilience of Black expectant families.

Programs can help families overcome barriers to accessing health care before, during, and after pregnancy. Refer to [How Head Start Services Can Improve Birth Outcomes](#) for tips to improve services for expectant families.



Learn More

To find recommendations for addressing health disparities faced by Black pregnant and postpartum women and people, check out these resources:

- [Working Together to Reduce Black Maternal Mortality](#)
- [Listen to the Whispers before They Become Screams: Addressing Black Maternal Morbidity and Mortality in the United States](#)



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