

A STRUCTURAL RACISM ANALYSIS AND EQUITY-CENTERED FUTURE FOR MMRC'S

by RACHEL HARDEMAN, PHD, MPH



WE ALL NEED OUR MOTHERS

U.S. HISTORY is RIFE w/ RACISM STARTING IN 1619

BLACK PEOPLE are HARDY

THESE BELIEFS UPHOLD WHITE SUPREMACY and STRUCTURAL RACISM

USED in MEDICAL RESEARCH

HAVE THICKER SKIN

DO NOT FEEL PAIN

LED to BIASED PERCEPTIONS in HCPs

IS RACISM OPERATING HERE?

HOW IS RACISM OPERATING HERE?



HOW to UPDATE FORM FIELDS to CAPTURE POTENTIAL PROBLEMS

DEPENDS ON THE INTROSPECTION OF THE REPORTER to RECKON WITH THEIR OWN BIASES

MY BIRTHING EXPERIENCE
WAS WONDERFUL LISTENED TO HONORED CARED FOR
but how many do not enjoy this privilege?

IMPLICIT BIAS
STRUCTURAL RACISM

ALLOWED SYSTEMS AND INFRASTRUCTURE TO ACT AGAINST BIPOC

THESE BIASES LEAD to HIGHER MATERNAL MORTALITY RATES

REDLINING DETERMINES ACCESS to HOUSING, HEALTH CARE and SERVICES for WOMEN

MMRC'S NEED TO BE EQUIPPED to UNDERSTAND THE LIVED EXPERIENCE of RACISM



ANTI-RACISM TRAINING

TOOLS: THERE ARE MANY TO HELP DOCUMENT SO WE CAN LEVERAGE DATA TO MAKE



REAL CHANGE

CENTER on the MARGINS

SHIFT to the PERSPECTIVE of BIPOC

FOCUS ON ADDRESSING BIASES

MAKING MATERNAL HEALTH A PRIORITY



COMMUNITIES ENGAGING in the FIGHT is CRITICAL

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COMMUNITY-BASED GRANT PROGRAMS IMPLEMENTING ACTIONS INFORMED BY MMRC DATA

BETHANY SCALISE, BSN, RN • ALLISON STEVENS, MPH, RRT • CHRISTINA RATLEFF, MPH

COMMUNITY ENGAGEMENT is CRITICAL

TENNESSEE

BETH

2 YRS into COMMUNITY PROGRAMS ALIGNED with MMRC RECOMMENDATION

\$200K TOTAL TO DISBURSE
EACH APPLICANT CAN GET UP TO \$20K

ACCESSIBILITY and CLARITY in APPLICATION PROCESS WITH TEMPLATES

PERFORMANCE INDICATORS to ENSURE ALIGNMENT

NARRATIVE is CRITICAL
• WHAT TO INCLUDE

SUSTAINABILITY PLANNING, POST FUNDING

FOUR HOSPITALS + MEDICAL CENTERS



- 4 VIRTUAL EVENTS
- PREGNANCY
 - CARDIO VASCULAR DISEASE
 - BIAS
 - DOMESTIC VIOLENCE

UNALLOWABLE COSTS MUST BE TRANSPARENT

OHIO

ALLIE DM21 COMMUNITY PROGRAM to ADDRESS

- COMMUNITY
- RACIALLY BASED HEALTH DISPARITIES

4 GRANTEES ALL TARGETING BLACK WOMEN DURING PRE/POST NATAL PERIODS

ALL IN OHIO EQUITY INSTITUTE COUNTIES FOCUSED ON INFANT MORBIDITY & MORTALITY

- COMMUNITY HEALTH ADVOCATES for TENSION
- MATERNAL HEALTH NURSE NAVIGATORS
- CELEBRATE 1
- TRACKING RACISM IN HEALTH CARE EXP.

CHRISTINA CELEBRATE 1 LISTENING SESSIONS

- IN JULY
- VIRTUAL
- 90 MIN
- PARTNERS
- 75 BIPOC

WILL PUBLISH OUR FINDINGS ON!

- INSIGHTS
- RECOMMENDATIONS
- PARTNER COMMITMENTS for CHANGE



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STRATEGIC STORYTELLING for MMRCs

KENN L. HARRIS • JANELLE PALACIOS, PhD, CNM • MAGDA G. PECK, ScD • KRISTINA WINT

WHY STORY? WHY IS STORY SO POWERFUL?

STORY
SHIFTS and SHAPES

with RESPECT and HONOR

STORIES are SACRED and POWER



THEY SPEAK to POWER

TELL ^{the} STORY _{for} HER

5 THINGS for STORY

CONTEXT is CRITICAL

EVERY ONE IS A STORY



STORIES are SACRED CURRENCY



STORIES STICK



PUBLIC STORY

MY FAMILY STORY

ALCOHOLISM

DOMESTIC VIOLENCE

TEEN PREGNANCY

SYSTEMIC RACISM

SEXUAL ASSAULT

FORCED STERILIZATION

70K INDIGENOUS WOMEN



the INDIGENOUS EXPERIENCE

GENOCIDAL PRACTICES

RESTRICTION of SELF-GOVERNANCE

PROVE your RIGHT to AMERICAN CITIZENSHIP

LANDS STOLEN

CULTURE LANGUAGE TRADITION

CHILDREN IN WHITE BOARDING SCHOOLS



PALTRY RESOURCES DISENFRANCHISEMENT

THEFT

POOR NUTRITION

SUGAR FAT SALT

UNPROTECTED FROM MURDER, PRISON AND POVERTY



PAIN · HURT · MICRO-AGRESSIONS · ERASURE · INEQUITY in HEALTH OUTCOMES

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MMRC CRITERIA for DETERMINING the PREGNANCY-RELATEDNESS of SUICIDE and UNINTENTIONAL OVERDOSE

by MARCELA SMID, MD



CAUSES →

- DEPRESSION
- PRE-EXISTING CONDITIONS
- ADDICTION
- CHANGES in MEDS



QUESTIONS

- EVIDENCE for DESTABILIZATION
- HOW to CLASSIFY EVIDENCE and WHAT QUESTIONS to ASK
- DELPHI METHOD:
TIMING and DOCUMENTATION to ASSESS CRITERIA
- ANSWER the SURVEY to CRAFT NATIONAL CRITERIA

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USING COMMUNITY-LEVEL DATA to IMPROVE UNDERSTANDING and PREVENTION of MATERNAL MORTALITY

MICHAEL KRAMER, PhD • CHLOE BARRERA, MPH • SHANNA COX, MSPH • TOBY MERKT, MPH



THIS TELLS US WHAT WE ALL KNOW

WE KNOW:

COMMUNITY LIFECOURSE
CONTEXT EMBODIMENT
FUNDAMENTAL SOCIAL DETERMINATION

FINDINGS ACROSS LOCATION



MORE BLACK DEATHS
LESS INDIGENOUS DEATH

VS



MORE INDIGENOUS DEATH
INCREASED DEATH for OLDER PEOPLE

CONTRIBUTING FACTORS →

COMMUNITY EDUCATION
RESIDENTIAL ACCESS to CARE
RACE / AGE

POOLING - ADJUSTING - STRATIFYING - ANALYZING



how do we find more data?

MANY FACTORS PERSIST ACROSS

ASSOCIATIONS for BLACK WOMEN ARE HIGHER BECAUSE OF STRUCTURAL RACISM

STORYTELLING

LIVED EXPERIENCE STORIES are IMPORTANT

to UNDERSTAND the WHY



HISPANIC, WHITE, AND BLACK WOMEN DO NOT SUFFER the SAME FACTORS

SMASH STRUCTURAL RACISM



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REFLECTIONS, ACTIONS and RECOMMENDATIONS ^{by} REGION

SHARE
RECOMMENDATIONS
with OUR REGION

ENSURE WE
TELL HER STORY
WHILE RESPECTING HER
PRIVACY

EXAMPLES
and TOOLS for
INTEGRATION



CENTERING
the MARGINS

AT ALL OF OUR MEETINGS



OUR DEFINE
COLLECTIVE
NARRATIVE



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SHE DOESN'T KNOW ^{the} WORD
M O M



YOUNG MOM
NO SUPPORT
COUNTLESS MISTAKES

"HYSTERICAL MOTHER"
DIES IN SILENT AGONY
RACISM BIAS
DISCRIMINATION

SIX
WORD
STORIES

SHE DIED.
WE INVESTIGATE.
WE LEARN.

HEMORRHAGING
on the CURB, EVERYONE STARED

NO-ONE ASKED
MISSED OPPORTUNITY. TRAGEDY



OBEISITY
DISCRIMINATION,
NOT HEARD, ALMOST
DIED

MY HANDS:
NURTURING · GUARDING
ADVENTURING · RECORDING



BE TRUTH.
BE COURAGE.
BE LOVE. ♥

A MOMENT in HISTORY.
JUSTICE. PEACE

SORROWFUL WORK
FULFILLED by MEANINGFUL
CHANGE ♥



4 ALIVE. ALWAYS
A MOM OF 5



EVERYONE WATCHED
MINNESOTA. THINGS MUST
CHANGE!

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