

AMERICAN MEDICAL ASSOCIATION WOMEN PHYSICIANS SECTION

Resolution: 1
(June 2022)

Introduced by: Suriya Sastri, MD

Subject: Strategies to Mitigate Racial and Ethnic Disparities in Maternal and Fetal Morbidity and Mortality at the Grassroots Level

Referred to: Reference Committee
(, MD, Chair)

1 Whereas, The United States has the highest maternal and infant mortality rates among
2 comparable developed countries, specifically in survival rates of African American mothers and
3 their infants, ^{1,2}and the rates for maternal mortality and severe maternal morbidity are about
4 three times higher for women who received C-sections versus vaginal deliveries,³ and academic
5 consensus recommend an urgency in implementation and tracking of remedial actions;^{1,2} and
6

7 Whereas, In the United States, Black women are more likely to receive C-sections when
8 compared to other women of color groups and white women, when adjusted for variables, even
9 among low-risk cohorts;^{3,4,5} and
10

11 Whereas, Mothers who were Medicaid recipients and received prenatal education and childbirth
12 support from trained doulas had lower odds of Cesarean sections and preterm births compared
13 to mothers who did not receive doula services;⁶ and
14

15 Whereas, Improving access to care, inclusivity of people of color, health prevention, affordable
16 healthcare and insurance coverage, tracking of quality outcome measures linked to provider
17 incentives are methods suited for eliminating racial disparities;^{5,6,7,8,9} and
18

19 Whereas, Eliminating barriers to training and licensure of a workforce pipeline inclusive of
20 doulas, midwives,^{6,10} and family physicians^{11,12,13} who provide maternity services made available
21 in rural and urban areas to supplement support to women can potentially reduce C-section rates
22 that put women and infants at risk;^{10,11,12,13} therefore, be it
23

24 RESOLVED, That our AMA advocate for institutional and departmental policies that promote
25 awareness and transparency in defining the criteria for identifying and mitigating gaps in health
26 equity in Maternal Fetal outcome measures affecting racial and minority U.S. population
27 (Directive to Take Action); and be it further
28

29 RESOLVED, That our AMA engage with relevant stakeholders to initiate a similar awareness
30 campaign for public health education and health prevention at the grassroots level in the
31 communities, and advocate Medicaid and affordable insurance coverage for ancillary support
32 services. (Directive to Take Action)

Fiscal note: TBD

Received: 3/25/2022

RELEVANT AMA POLICY

1. Disparities in Maternal Mortality D-420.993
2. Reducing Inequities and Improving Access to Insurance for Maternal Health Care H-185.917

References:

1. Jain JA, et al. SMFM Special Report: "Putting the "M" back in MFM: Reducing racial and ethnic disparities in maternal morbidity and mortality: A call to action". smfm.org Feb (2018) B9-17
2. Abdollahpour, Sedigheh, et al. "The relationship between global gender equality with maternal and neonatal health indicators: an ecological study." *The Journal of Maternal-Fetal & Neonatal Medicine* (2020): 1-7.
3. Debbink, Michelle P., et al. "Racial and Ethnic Inequities in Cesarean Birth and Maternal Morbidity in a Low-Risk, Nulliparous Cohort." *Obstetrics & Gynecology* 139.1 (2022): 73-82
4. Declercq, Eugene. "FINAL REPORT R40 MC 08720-01." (2010).
5. Valdes, Elise G. "Examining cesarean delivery rates by race: A population-based analysis using the Robson Ten-Group Classification System." *Journal of Racial and Ethnic Health Disparities* 8.4 (2021): 84-851
6. Taylor, Jamila, et al. "Eliminating racial disparities in maternal and infant mortality: a comprehensive policy blueprint." *Center for American Progress* 1.1 (2019): 1-93.
7. Glazer, Kimberly B., et al. "Hospital quality of care and racial and ethnic disparities in unexpected newborn complications." *Pediatrics* 148.3 (2021).
8. Shahul, Sajid, et al. "Racial disparities in comorbidities, complications, and maternal and fetal outcomes in women with preeclampsia/eclampsia." *Hypertension in pregnancy* 34.4 (2015): 506-515.
9. Smith, Kendra L., et al. "Ignored and Invisible": Perspectives from Black Women, Clinicians, and Community-Based Organizations for Reducing Preterm Birth." *Maternal and Child Health Journal* (2022): 1-10.
10. Avery, D., and J. McDonald. "The declining number of family physicians practicing obstetrics: rural impact, reasons, recommendations and considerations." *Am J Clin Med* 10, no. 2 (2014): 70-78.
11. Avery, D. M., Kristine R. Graettinger, Shelley Waits, and Jason M. Parton. "Comparison of delivery procedure rates among obstetrician-gynecologists and family physicians practicing obstetrics." *Am J Clin Med* 10, no. 1 (2014): 16-20.
12. Deutchman, Mark, Pamela Connor, Robert Gobbo, and Ray FitzSimmons. "Outcomes of cesarean sections performed by family physicians and the training they received: a 15-year retrospective study." *The Journal of the American Board of Family Practice* 8, no. 2 (1995): 81-90.
13. Young, Richard A. "Maternity care services provided by family physicians in rural hospitals." *The Journal of the American Board of Family Medicine* 30, no. 1 (2017): 71-77.