



AAMA

Black Maternal Health Toolkit

A Guide for Mayors to Improve
Black Maternal Health Outcomes



Black Maternal Health Disparities

Black Mom Mortality

Black mothers are 3 to 4 times more likely to die in childbirth than white women. Black women are also more likely to experience preventable maternal death compared with white women. Black women's heightened risk of pregnancy-related death spans income and education levels.

Black Infant Mortality

Infants born to Black women are over twice as likely to die relative to those born to White women. Black women have higher preterm births and more pregnancy complications.



Hospital Disparities

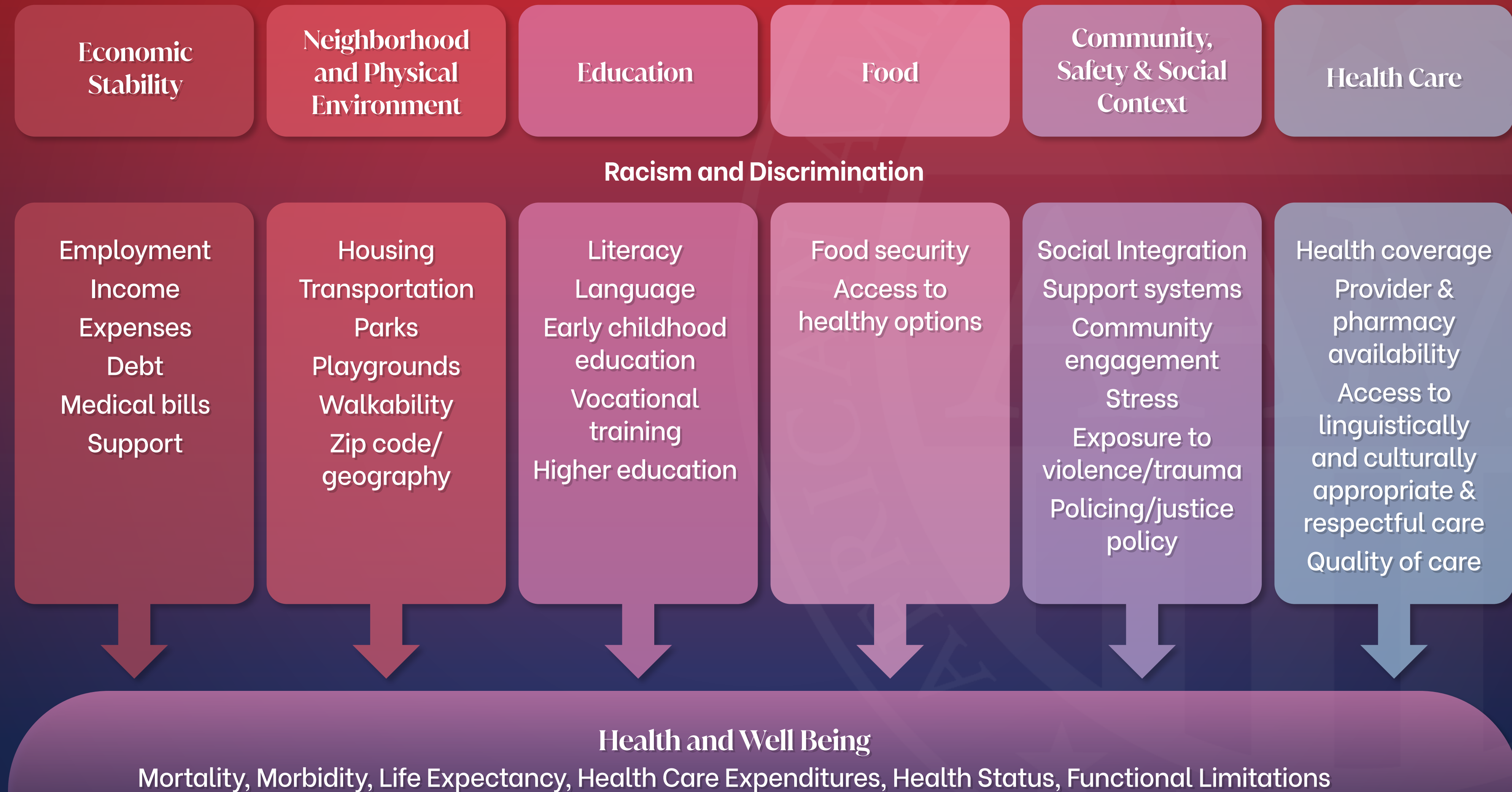
Seventy-five percent of Black women give birth at hospitals that perform worse on 12 of 15 birth outcomes, including elective deliveries, non-elective cesarean births and maternal mortality.

Lack of Access to Quality Prenatal Care

Black women also are nearly twice as likely compared to White women to have a birth with late or no prenatal care compared to White women.

Structural and Social Determinants of Maternal Health

Health disparities are driven by social and economic inequities that are rooted in historic and ongoing racism and discrimination



Solutions: What Black Moms Need



Reproductive Healthcare

Quality, patient-centered reproductive health care is critical to improving maternal health and addressing the reproductive health disparities that Black women face. Some Black women must continue risky or unintended pregnancies.



Quality Maternal Healthcare

Black women need access to consistent, quality maternal healthcare, including prenatal care for high risk pregnancies, response to obstetric emergencies, and continuity of postpartum care.



Non-Discrimination

Black women should receive health care that is respectful and culturally competent. Unfortunately, Black women receive a lower quality of care than white women. Twenty Two percent of Black women report discrimination when going to the doctor or clinic.



Accountability

Black women need solutions based on accurate maternal health data and maternal mortality review processes supported by government at every level.

Problems for City Health Departments

Disinvested

Public health departments are funded through a grading system that inherently disinvests struggling health departments.



Lack of Direct Funding

Most major funding sources for maternal health initiatives are not directly available to cities or their public health departments.

Disenfranchised

Federal funding resources for maternal health initiatives flow through states and independent health systems but city public health departments don't have a meaningful seat at the table.

Lack of Resources

Many cities' public health departments also lack the workforce needed to write grants and develop comprehensive maternal healthcare initiatives so they must subcontract with outside groups.



Reproductive Healthcare: Post Dobbs Impact on AAMA Cities

Because unintended pregnancies are a significant factor in maternal health outcomes for Black women, understanding and navigating state laws around reproductive healthcare are particularly important for AAMA Mayors.

	STATES		AAMA CITIES	
COMPLETE ABORTION BAN/ILLEGAL	Alabama Arkansas Missouri Texas* Effective this Summer		11 Alabama Cities 6 Arkansas Cities 5 Missouri Cities 5 Texas Cities	
BANNED WITH EXCEPTION FOR RAPE & INCEST	Oklahoma Mississippi* exc. rape not incest		Fort Coffee, OK 6 Mississippi Cities	
BAN PENDING OR CONTESTED/ RESTRICTED ABORTIONS	Tennessee Arizona Kentucky Louisiana	Florida Georgia South Carolina Ohio	2 TN Cities 2 AZ Cities Hopkinsville, KY 6 LA Cities	4 FL Cities 11 GA Cities 11 SC Cities 4 OH Cities

Key Components of City Maternal Health Improvement Plan

Strengthen City Health Departments

Mayors should strengthen city health departments through direct funding allocations to appoint personnel and fund initiatives to improve maternal health outcomes.

Pursue Direct Funding

Mayors should exhaust all grants, direct state and federal funding opportunities, and public private partnerships to increase a workforce and initiatives dedicated to maternal healthcare.

Lead By Example

Mayors may be able to lead by example by ensuring their employees have health coverage supporting access to abortions and contraceptive care, and quality maternal healthcare.

Advocate

Mayors can advocate for changes in state and federal law, advocate for accountability in private healthcare facilities in their cities, and encourage companies in their cities to provide reproductive access consistent with state law.



Strengthen City Health Departments

Having an FTE Maternal Health expert is critical to ensuring that the resources and workforce needed to carry out initiatives

Appoint a Maternal Health Expert

1

Cities like NYC and DC have developed initiatives around data gathering and doula services that have helped improve maternal health outcomes

Develop Initiatives

2

Public and Private grants are essential for advancing robust maternal health initiatives for cash-strapped city health departments.

Hire a Grant Writer

3

Grassroots organizations and private entities in cities that are working within the healthcare policy space are important partners for maternal health initiatives.

Leverage PPPs

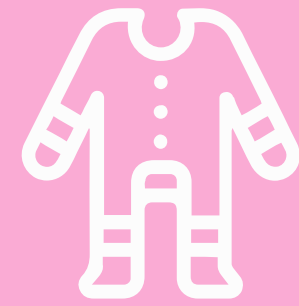
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Lead by Example: Mayors as Employers

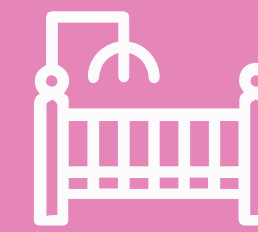
Healthcare

Mayors should ensure that their healthcare insurance coverage provides adequate access to quality reproductive and maternal healthcare.



Urge Other City Employers

Mayors should also use their influence to urge other major employers operating in their cities to provide comprehensive healthcare for reproductive health, family planning, and maternal care.



Maternity Leave

Mayors should ensure that new parents on their staff have adequate postpartum leave and resources to address healthcare issues and mental health once they have given birth.



Direct Resources

Cities like St. Louis have directed city resources to maternal health partners and initiatives. Mayors should set an example by allocating funds to support organizations directly.



Advocate

State Advocacy

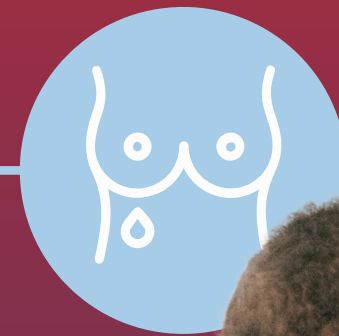
Mayors should advocate for state laws that foster access to quality maternal care.

Key policies include:

- Improve statewide data collection
- Improve maternal health review processes
- Ensure city involvement in budget & implementation
- Fund accountability measures

Federal Advocacy

Mayors should advocate for direct federal resource for city public health departments and increased requirements for states to involve mayors and community organizations in data collection, planning, and budgeting of maternal health initiatives



Coordinating Coalitions

Mayors have a very powerful platform to coordinate public entities, private companies and organizations operating within their cities and can leverage their position to develop coalitions.

Join National Efforts

There a number of national efforts coordinating data and convening experts on black maternal health as a public health issue. Mayors should join these efforts as partners to provide valuable data and amplify powerful advocacy.

Pursue Funding: Direct to City Resources



CityMatCH

CityMatCH is a national membership organization of city and county health departments' maternal and child health (MCH) programs and city leaders



Integrated Maternal Health Program

This program will support comprehensive care for pregnant and postpartum people who experience health disparities and have limited access to basic social and health care services.



Alliance for Innovation on Maternal Health

The goal of this initiative is to improve maternal health and safety in the United States by increasing access to safe, reliable, quality care.



IMPROVE Community Implementation Program

Provides funding for early-phase studies of community-engaged research to test implementation strategies related to the adoption, integration, scale up, and sustainability of implementation of interventions known to improve the health of moms-to-be.



Quality Improvement Fund-Maternal Health

The QIF is a unique funding opportunity that supports health centers to pilot and test new ideas. Health centers propose solutions to improve maternal healthcare

Pursue Funding: Federal to State Resources



Title V HRSA MCH Block Grant

This grant supports between the health and well-being of all mothers, children, and families.

State Maternal Health Innovation Program

The purpose of this program is to reduce maternal mortality by supporting state-led demonstrations focused on improving maternal health and addressing maternal health disparities

National Maternal and Child Health Data Resource Center

This program helps states leverage a national maternal and child health database to inform policies.

Strengthen the Evidence for MCH Programs Funding

The purpose of this program is to increase the effective design, implementation, and monitoring of evidence-based or -informed strategies by Title V Maternal and Child Health (MCH) Services Block Grant programs.

ERASE MM Program

This funding directly supports agencies and organizations that coordinate and manage Maternal Mortality Review Committees to identify, review, and characterize pregnancy-related deaths; and identify prevention opportunities.

Federal Resources

Centers for Disease Control and Prevention (CDC): conducts scientific research, monitors U.S. health, and provides health information while acting as the national agency responsible for health protection; tracks diseases and analyzes data related to U.S. maternal mortality and morbidity; uses science and technology to prevent disease; provides resources, training, and guidance to the public health workforce. States can use the Maternal Mortality Review Data System (MMRDS) developed by the CDC to help them collect and abstract data, develop case summaries, conduct analysis, and document committee findings and recommendations.

Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB): partners with key stakeholders to improve the physical and mental health, safety, and well-being of the nation's women, children, and families; funds programs, research and other efforts to address the needs of these groups across the lifespan; provides funds to states and jurisdictions through the Title V Maternal and Child Health Block Grant, as well as discretionary grants; focuses on health disparities, health equity, and social causes of health outcomes.

Healthy People 2020: provides science-based, ten-year national objectives for improving U.S. population health (at national, state, and local levels) as part of a national health promotion and disease prevention agenda; includes goals aimed at improving health equity and addressing social determinants of health; includes maternal health indicators and benchmarks related to maternal mortality and morbidity, access to maternal health services, and pregnancy and postpartum care; provides recommendations on maternal health interventions and other tools and resources.

National Institutes of Health (NIH): serves as the nation's medical research agency, and the largest funder of biomedical research in the world; funds projects aimed at enhancing health and life expectancy and reducing illness and disability in the United States, including projects related to maternal health; drives discovery and translation of new health ideas.

Office of Minority Health, U.S. Department of Health and Human Services: works to improve the health of racial and ethnic minority populations through the development of health policies and programs that help eliminate health disparities; maintains the OMH Resource Center, which provides access to literature and information on the health status of racial and ethnic minority populations.

CityMatCH: CityMatCH is a national membership organization of city and county health departments' maternal and child health (MCH) programs and city leaders
Website:<https://www.citymatch.org/>

Federal Resources

Integrated Maternal Health Program: The purpose of this program is to reduce maternal mortality by supporting state-led demonstrations focused on improving maternal health and addressing maternal health disparities. **Website:** <https://www.hrsa.gov/grants/find-funding/HRSA-23-106>

Alliance for Innovation on Maternal Health: This program helps states leverage a national maternal and child health database to inform policies. **Website:** <https://mchb.hrsa.gov/programs-impact/programs/alliance-innovation-maternal-health>

Improve Community Implementation Program: Provides funding for early-phase studies of community-engaged research to test implementation strategies related to the adoption, integration, scale up, and sustainability of implementation of interventions known to improve the health of moms-to-be. **Website:** <https://www.nichd.nih.gov/research/supported/IMPROVE>

Quality Improvement Fund for Maternal Health: The QIF is a unique funding opportunity that supports health centers to pilot and test new ideas. Health centers propose solutions to improve maternal healthcare.

Website: <https://bphc.hrsa.gov/funding/funding-opportunities/quality-improvement-fund-maternal-health>

Title V HRSA MCH Block Grant: This grant supports between the health and well-being of all mothers, children, and families

Website: <https://mchb.hrsa.gov/programs-impact/title-v-maternal-child-health-mch-block-grant>

State Maternal Health Innovation Program: The purpose of this program is to reduce maternal mortality by supporting state-led demonstrations focused on improving maternal health and addressing maternal health disparities. **Website:** <https://mchb.hrsa.gov/programs-impact/programs/state-mhi>

National Maternal and Child Health Data Resource Center: This program helps states leverage a national maternal and child health database to inform policies. **Website:** <https://www.hrsa.gov/grants/find-funding/HRSA-23-082>

Strengthen the Evidence for MCH Programs Funding: The purpose of this program is to increase the effective design, implementation, and monitoring of evidence-based or -informed strategies by Title V Maternal and Child Health (MCH) Services Block Grant programs.

Website: <https://www.hrsa.gov/grants/find-funding/HRSA-23-072>

Erase MM Program: This funding directly supports agencies and organizations that coordinate and manage Maternal Mortality Review Committees to identify, review, and characterize pregnancy-related deaths; and identify prevention opportunities.

Website: <https://www.cdc.gov/reproductivehealth/maternal-mortality/erase-mm/index.html>

National Advocacy Groups

Access Reproductive Care (ARC) – Southeast: provides funding and public advocacy to help individuals and families in the South navigate pathways toward safe, compassionate, and affordable reproductive health care access.

Center for Reproductive Rights: uses the law to advance reproductive freedom as a fundamental human right; provides technical assistance to state-based partners on reproductive health law, policy and human rights advocacy strategies, including those related to maternal health in the South.

Childbirth Connection: engages consumers to improve the quality and value of maternal health care; advocates for evidence-based, high quality care, shared decision-making, and improved health outcomes; maintains a directory of maternal and perinatal care quality collaboratives; publishes reports and surveys including the Transforming Maternity Care project, which lays out a vision and action plan for improving maternity care in the United States.

Choices in Childbirth: provides expectant parents with information and education so they can experience the birth they want and choose; conducts education and advocacy activities to expand families' choices about where, how, and with whom to birth.

National Birth Equity Collaborative: engages in research, advocacy, and family centered collaboration to reduce African American infant mortality; mobilizes health and civil rights organizations; and targets ten U.S. cities with the highest Black infant mortality rates and provides support to local leaders through the Campaign for Black Babies.

National Healthy Mothers, Healthy Babies Coalition (HMHB): creates partnerships among community groups, nonprofits, professional associations, businesses, and government agencies to improve the health and safety of mothers, babies, and families; provides educational materials and opportunities for collaboration (including state and local HMHB coalitions) and influences maternal health policy.

National Women's Law Center (NWLC): champions laws and policies that promote equality and opportunity for women and families; provides resources and advocacy on pregnancy and health issues, including resources on women's health care coverage; publishes state-by-state reports that track key state laws and policies affecting women; maintains a national and state-by-state report card on women's health, which includes maternal mortality and prenatal care indicators.