

Working together to advance **maternal health equity**



MATERNAL HEALTH DISPARITIES BY THE NUMBERS

Learn how these disparities affect diverse segments of your workforce, especially people of color

UNDERSTAND THE ROOT OF MATERNAL HEALTH DISPARITIES

See key contributing factors, including access to care

WAYS FOR EMPLOYERS TO TAKE ACTION

Maternal health equity takes all of us—explore how you can do your part

The United States is in the midst of a maternal health crisis. New and expectant mothers face increasing rates of both pregnancy- and childbirth-related complications, and are more than two times as likely to die from these complications compared to women in most other high-income countries.¹

The health disparities are disproportionately and unacceptably high among pregnant women of color. Women in majority Black and Hispanic communities face 63 percent and 32 percent higher rates, respectively, of severe maternal morbidity (SMM) than women in majority white communities.*²

With women encompassing nearly half of the workforce, and 85 percent of them becoming mothers during their careers, these disparities have serious implications for employers.³ The need to build a new, more equitable model of healthcare has never been more urgent. **But we need your help—because closing these disparity gaps and improving maternal health takes all of us.**



50% ↓

IN FIVE YEARS

Blue Cross and Blue Shield companies have set a goal to reduce racial disparities in maternal health by 50% in five years.

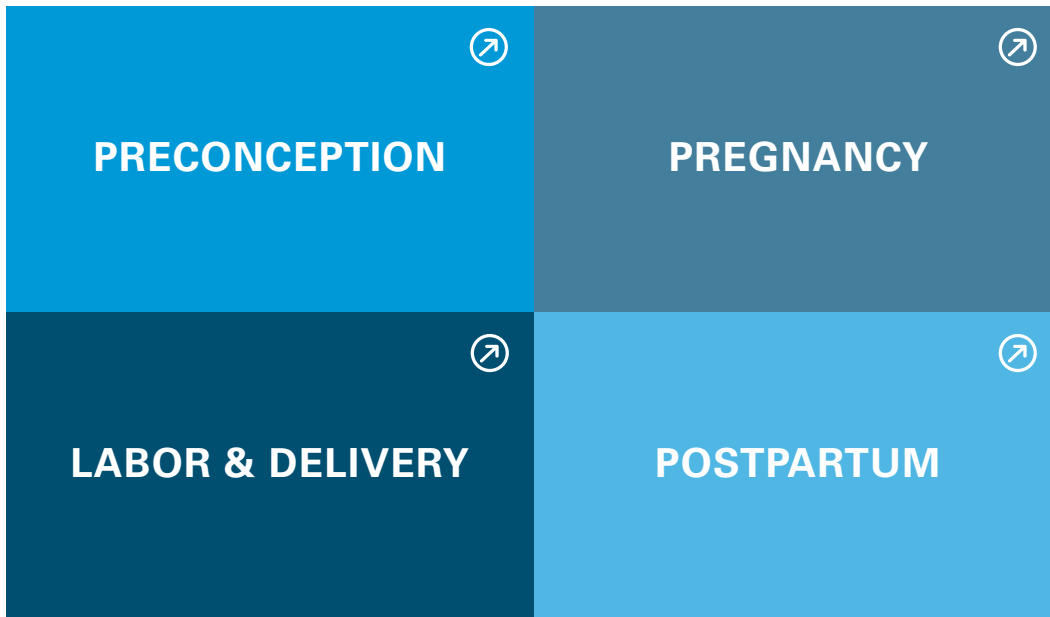
Learn more at
bluehealthequity.com.

*Among women with employer-sponsored health insurance.



Maternal health equity: scale of impact

Grasping the extent of maternal health disparities is the first step in being able to provide support to expectant mothers in your workforce.



Impact on employers

A majority of women in the workplace will become mothers during their careers, and 50,000 women suffer life-threatening pregnancy complications each year.²⁰ These risks are especially high for women of color. This can have a huge impact on the health and overall well-being of your employees, their families and your business.

To help advance maternal health equity, employers can support improving access to quality care.

[Learn more.](#)



Understanding maternal health disparities

When addressing the many complex, interrelated reasons for maternal health disparities, it's important to understand the impact of social determinants of health (SDoH) on health equity and how they affect maternal health. To learn more about SDoH and explore some overarching factors influencing health equity, check out our [first Health Equity mini-eMagazine](#). Below are a few more key influencing factors.

Provider bias and inequality of care

Healthcare providers can have both conscious and unconscious bias when treating people of different backgrounds. Approximately a third of Black people report being racially discriminated against when going to a doctor or health clinic.²⁴ A BCBS survey showed that as compared to white and Hispanic mothers, Black mothers report feeling their provider did not spend enough time with them, have lower confidence they will receive the care they need and feel like they cannot openly speak to their provider about their pregnancy.²⁵

Lack of access to care

People of color have less access to quality care from contraception to postpartum.²⁶ Regular prenatal care can reduce the risk of pregnancy complications.²⁷ In addition, compared with white mothers, mothers of color say they were not always able to complete the recommended series of prenatal visits, mainly because of a lack of transportation or scheduling conflicts.²⁸ Furthermore, Black mothers are more likely to face greater financial barriers to care than white mothers.²⁹ COVID-19, which disproportionately affects people of color, has also played a role in reducing prenatal visits.³⁰

Chronic conditions and weathering

Women in communities of color face much higher prevalence rates of underlying chronic conditions that are risk factors for SMM, such as preexisting diabetes (Black 62 percent, Hispanic 38 percent) and anemia, than women in majority white communities.³¹ Women of color also experience "weathering," or an increased vulnerability to health risks due to the constant stress of encountering racism. This makes pregnancy riskier, as experiencing racism and prenatal stress are linked to adverse birth outcomes, such as low birthweight and preterm delivery.³²



2 OUT
OF **3**

pregnancy-related deaths
are preventable.³³



**“Every mother deserves
to have the best care,
regardless of age, race,
ethnicity and ZIP code.”**

*– Kim A. Keck,
President and CEO
of the Blue Cross Blue
Shield Association*

What we can do together

Women with employer-sponsored health insurance account for over half of the annual pregnancies in the United States.³⁴ This puts employers and health plan partners in a unique position to positively impact maternal health by exploring benefit design options, involving local communities and fostering a supportive and inclusive workplace culture.

Explore expanding benefits and strengthening networks

Collaborate with your health plan partner to improve access to higher-quality, more affordable maternal care.



Collaborate with communities

Engage with your local community to build an expansive support system.



Create culturally competent workplaces

Communicate openly to educate your workforce about maternal health disparities.



See firsthand the tragic impact of maternal health disparities and how employers can help change the tide.

View [Achieving Equity in Maternal Healthcare](#).



IN ON HEALTH EQUITY:

Providing high-quality, affordable maternal care



To help address disparities and gaps in care, Blue Cross and Blue Shield companies' Blue Distinction Centers for Maternity Care demonstrate expertise and a commitment to quality care for mothers and their babies. Blue Distinction Centers+ providers demonstrate more affordable care in addition to meeting established quality thresholds. These Centers also have a maternity care quality improvement program, a lower percentage of early elective deliveries (including 75 percent fewer early elective deliveries and a 24 percent lower cesarean section delivery rate), lower readmission rates and lower complication rates when compared to non-designated providers.

Championing community and care support for moms

To help address disproportionate mortality rates among mothers and children, especially in underserved communities, Blue Shield of California has launched a new maternal and infant health initiative that provides community-based resources, doulas and technology tools to transform support and care for expecting and new mothers and their babies. This effort is an example of Blue Shield of California's commitment to addressing the ongoing racial health inequities that directly impact the health of mothers and infants. The goal of the program is to bring equitable maternity support for mothers through a high-tech, high-touch approach and collaboration with community-based organizations.³⁹



**WHAT ARE
DOULAS AND
MIDWIVES?**

Join the movement to advance maternal health equity

The logo consists of the words "THIS IS HOW" in a bold, sans-serif font. "THIS" and "HOW" are in a larger font size than "IS". A small "SM" trademark symbol is located at the bottom right of the word "HOW". The logo is contained within a white rectangular border.

Have your only bias be for action

Consider the fact that women with employer-sponsored health insurance account for over half of the annual pregnancies in the United States, and you start to see the influence and impact employers can have in pushing for higher-quality care.⁴² Pursue ways to collaborate with your health plan partner to advance and expand maternal health equity across the care continuum.

Make workplaces safe spaces for expressing maternal health needs

One of the best ways to know what your workforce needs is to engage with them. Design ways to open dialogue and check in with employee populations of all types, and meet with Employee Resource Groups (ERGs) to share education on maternal health disparities. But most of all, listen to their needs and concerns, and respond with support.⁴³

Get everyone involved

Advancing maternal health equity requires a collaborative approach. Ask your health plan partner to see what solutions they can offer, and approach local communities for available resources. By working together, we can confront racial disparities in maternal healthcare and take actions that make pregnancy safer for all women.

Learn more at [smarterbetterhealthcare.com](https://www.smarterbetterhealthcare.com).

- ¹ Roosa Tikkanen, et al., Maternal Mortality and Maternity Care in the United States Compared to 10 Other Developed Countries, The Commonwealth Fund, Nov. 18, 2020.
- ^{2, 6, 7, 8, 25, 28, 30, 31} Blue Cross Blue Shield Association, The Health of America Report, “Racial Disparities in Maternal Health,” May 20, 2021.
- ³ Bryan Robinson, “Pregnancy Discrimination In The Workplace Affects Mother And Baby Health,” *Forbes*, July 11, 2020.
- ⁴ American College of Obstetricians and Gynecologists and the Society for Maternal-Fetal Medicine; Sarah K. Kilpatrick and Jeffrey L. Ecker, “Severe Maternal Morbidity: Screening and Review,” *American Journal of Obstetrics and Gynecology*, 215(3), B17-22, Sept. 2016.
- ⁵ Division of Reproductive Health, National Center for Chronic Disease Prevention and Health Promotion, “Reproductive Health: Severe Maternal Morbidity in the United States,” Centers for Disease Control and Prevention, Feb. 2, 2021.
- ⁹ Eugene Declercq and Laurie Zephyrn, Severe Maternal Morbidity in the United States: A Primer, The Commonwealth Fund, Oct. 28, 2021.
- ^{10, 33} Gianna Melillo, “Racial Disparities Persist in Maternal Morbidity, Mortality and Infant Health,” *AJMC*, June 13, 2020.
- ^{11, 13} Samantha Artiga, et al., Racial Disparities in Maternal and Infant Health: An Overview, KFF, Nov. 10, 2020.
- ¹² Tori B. Powell, “Black Women Are at Higher Risk for Miscarriage, Study Finds,” *CBSN*, Apr. 29, 2021.
- ^{14, 16} “Black Women Have the Highest Risk of Pregnancy-Related Heart Problems in the US,” American Heart Association, Dec. 16, 2020.
- ¹⁵ Blue Cross Blue Shield Association. Health of America, Maternal Health Data. 2020.
- ¹⁷ Zoleykha Asgarlou, Mohammad Arzanlou, and Mohammad Mohseni, “The Importance of Screening in Prevention of Postpartum Depression,” *Iranian Journal of Public Health*, May 2021, 1072–1073, cited in National Center for Biotechnology Information/US National Library of Medicine, National Institutes of Health.
- ¹⁸ Blue Cross Blue Shield Association, Maternal Health Survey. 2020.
- ¹⁹ Blue Cross Blue Shield Association, Analysis on Postpartum Depression. 2022.
- ^{20, 22, 23, 34, 37, 42} Suzanne Delbanco, et al., “The Rising U.S. Maternal Mortality Rate Demands Action from Employers,” *Harvard Business Review*, June 28, 2019.
- ²¹ New WHO Guidance on Non-clinical Interventions Specifically Designed to Reduce Unnecessary Caesarean Sections, World Health Organization (WHO), 2018.
- ²⁴ “Poll Finds at Least Half of Black Americans Say They Have Experienced Racial Discrimination in Their Jobs and from the Police,” Harvard T. H. Chan School of Public Health, Oct. 24, 2017.
- ^{26, 32, 35, 36, 38, 43} “Well-being and Workforce Strategy: Ending Disparities in Maternal Mortality,” Business Group on Health, April 14, 2021.
- ²⁷ Office of Communications, What Is Prenatal Care and Why Is It Important? National Institute of Child Health and Human Development, Jan. 31, 2017.
- ²⁹ Black Women’s Maternal Health: A Multifaceted Approach to Addressing Persistent and Dire Health Disparities, National Partnership for Women & Families, Apr. 2018.
- ³⁹ Brianna Keefe, “Pursuing Equitable, Quality Care for Black Mothers and Babies,” *The Health of America™*, BlueCross BlueShield, Oct. 12, 2021.
- ⁴⁰ Kristin Gourlay, “How Doulas Can Improve the Safety of Childbirth for Women of Color,” The Health of America, Maternal Health, Blue Cross Blue Shield Association (BCBSA), March 3, 2021.
- ⁴¹ Definition of Midwifery and Scope of Practice of Certified Nurse-Midwives and Certified Midwives, American College of Nurse-Midwives, Dec. 2021.