

African American Mothers’ Perspectives of Biased Medical Practices: Potential Implications for Maternal Health Education

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Method

The proposed study will use a phenomenological approach, which uses semi-structured interviews to gather participants' experiences surrounding medical bias and racism, along with personal. Experiences from pregnancy to postpartum. This study will also employ a screener survey to identify and exclude participants who are not eligible for the study. The interviews for each participant will range from 30 minutes to two hours in duration. This is to leave space for the conversation between the researcher and participant. It also uses thematic analysis of previous literature to exploit the history of medical racism in the United States and to expand the knowledge of maternal health care practices that may impact African American women's health outcomes.

Participants

Participants in the study were women aged 18 years or older of African American descent. The women in the study needed to be between currently pregnant to no more than a year postpartum. For this pilot study, three African American women were interviewed, all of whom were one month past the one-year postpartum mark.

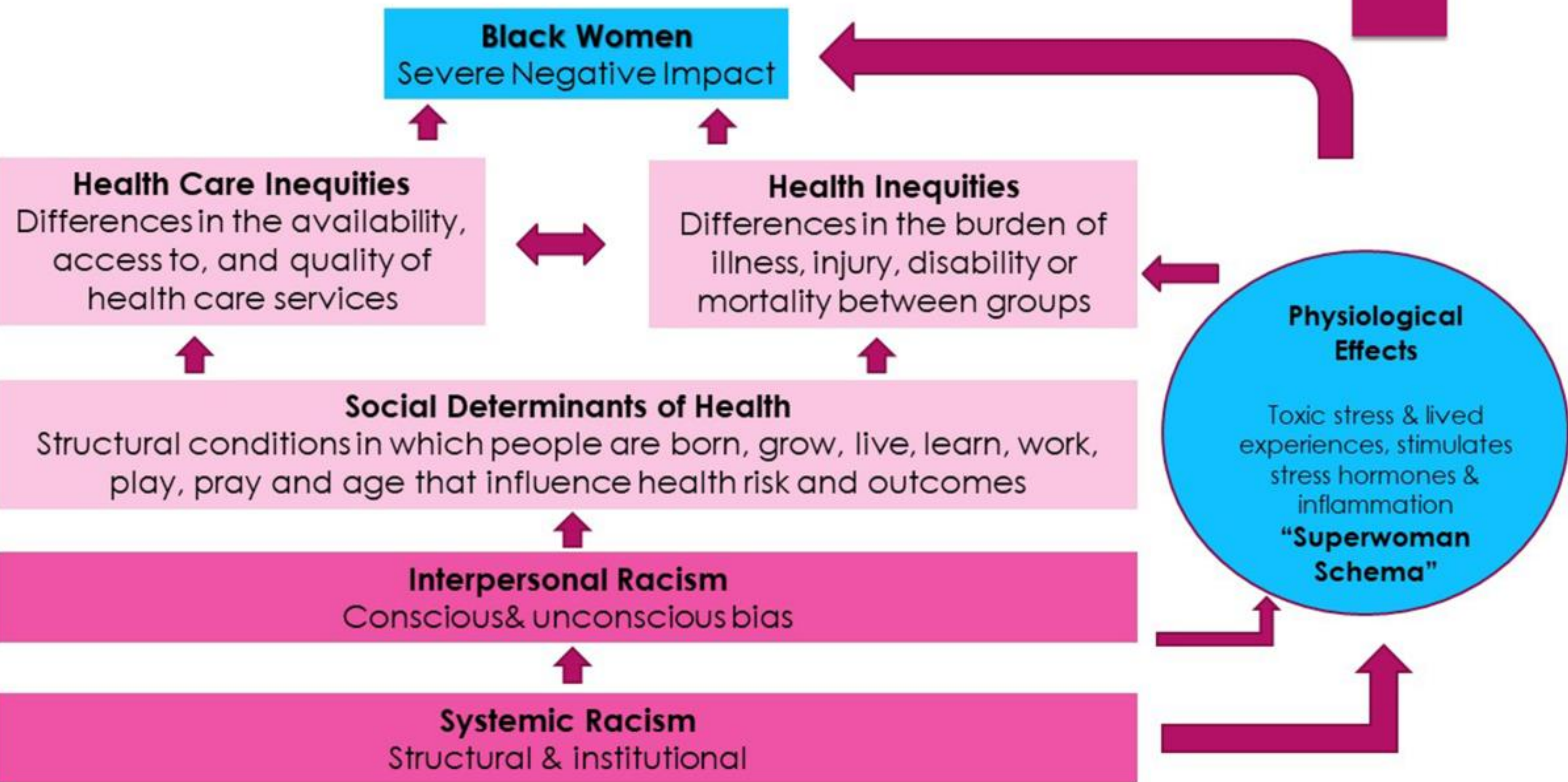
Aims of the Research

The aims of my research are to discuss the gaps in knowledge surrounding the adverse experiences of African American women and maternal health professionals and their practices and teachings, and to explore how medical (mis)education and medical education can impact maternal health outcomes for African American women.

Research Questions

R1. What is the relationship between medical bias and maternal spaces in the increased mortality rate of African American women who are currently pregnant, up to a year postpartum (perinatal period)

The Impact of Racism on Black Maternal Health



Abstract

This research explores the medical (mis)education of maternal healthcare providers and the impact that this could have on African American women. The United States is facing a critical maternal health crisis, with African American women being three to four times more likely than non-Hispanic white women to experience pregnancy-related deaths (Omeish & Kiernan, 2020), despite over 60% of these deaths being preventable (Omeish & Kiernan, 2020). Previous research has explored the social determinants of health (SDOH) and systemic and structural factors that impact maternal mortality and morbidity. While these are important, it is proposed that the most concerning risk factor is the implicit bias from maternal healthcare providers (e.g., doctors and nurses). These harmful biases can be traced back to the history of gynecology in the United States. James Marion Sims, known as “the father of modern gynecology”, advanced the field of gynecology by performing cruel experiments on enslaved African American women. His tools, techniques, and biases were all recorded and used to establish the foundations of gynecology and are still used today. These foundations are still being taught to medical students and are used to inform maternal healthcare. “Even when healthcare providers do not display explicit discrimination, implicit bias still exists” (Saluja & Bryant, 2021).



Data Collection and Analysis

The qualitative analysis software Zotero was used to organize and analyze the literature. Then, the software Riverside was used to record and transcribe the interviews from the participants, along with any notes and recordings made by them. All notes recorded and transcriptions from each interview were stored in a university security folder that will be shared with only the researchers' Principal Investigator (PI).

Discussion

THEMES PULLED	
Not Feeling Heard	Women felt that their concerns, ideas, and desires about their birth were not heard by hospital staff.
Having Good Support Systems	All of the women I interviewed discussed how having a good personal support system made them feel more supported in birth, even if the hospital staff wasn't as supportive.
Fear Mongering	The women I interviewed all recalled instances at one point or another, some type of fear-mongering, from either the hospital or others in their lives.
Racism in Maternal Spaces	All of the women I interviewed dealt with racism and/or discrimination in hospital settings, whether it was against them or someone they knew.

Key References



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PURPOSE

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