Maternal-Child Health Disparities: Breaking Down the Barriers

Marie-Elizabeth Ramas, MD, FAAFP
3 October 2016
Disclosures

• No disclosures or conflicts of interest
Goals of Presentation

• Define disparities and how they relate to health outcomes

• Define factors that contribute to poor health equity

• Identify significant areas of health disparities in maternal and child health
Goals of Presentation

• Discuss interventions that may reduce barriers to quality health care
• Clarify the role of family physicians in the improvement of maternal child health disparities
Maternal-Child Disparities

• Association of State and Territorial Health Officials (ASTHO) issue brief (2012)

• Devoted to reduction of maternal and infant health disparities
  – Public Health Concern
Health Equity

“Health equity means social justice in health. No one is denied the possibility to be healthy for belonging to a group that is historically economically and socially disadvantaged”

- Paula Braveman and Laura Gottlieb 2014
Health Disparities

“Health Disparities are the metrics we use to measure progress toward achieving health equity”

- Paula Braveman and Laura Gottlieb
Determinants of Health

- Patients' health depends upon the context in which they live.
- Socioeconomic factors affect health outcomes.
Determinants of Health

• 2012: IOM report noted 83,000 preventive deaths yearly due to racial/ethnic disparities

• 2006 sentinel IOM report demonstrate ethnic disparities
  • Ex infant preventive services and primary language
Infant Mortality

NOTES: Canada’s 2010 data were not available from the Organisation for Economic Co-operation and Development (OECD) at the time of manuscript preparation. The 2009 infant mortality rate for Canada was 4.9. If the 2010 data for Canada had been available, the U.S. rankings may have changed. Deaths at all gestational ages are included, but countries may vary in completeness of reporting events at younger gestational ages.

SOURCES: CDC/NCHS, linked birth/infant death data set (U.S. data); and OECD 2014 (all other data). Data are available from: http://www.oecd.org.
Infant Mortality in US

• Non-Latino Blacks 2.4 higher mortality rate than white counterparts

• Leading cause of mortality is low birth weight (LBW)
Low Birthweight

- LBW = BW < 2,500g
- Increased risk for developmental disorders
- AA 3-4x higher risk for LBW than Whites

Source: Centers for Disease Control and Prevention, National Center for Health Statistics, Vital Statistics Online
Maternal Mortality

• WHO definition: death while pregnant or within 42 days of termination of pregnancy

• In developed countries: death within 365 days of termination of pregnancy
Maternal Mortality

Maternal Deaths in the U.S. Are on the Rise
Maternal mortality ratio (number of maternal deaths per 100,000 live births)

<table>
<thead>
<tr>
<th>Year</th>
<th>United States</th>
<th>Developed Regions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1990</td>
<td>26</td>
<td>430</td>
</tr>
<tr>
<td>1995</td>
<td>16</td>
<td>26</td>
</tr>
<tr>
<td>2000</td>
<td>16</td>
<td>230</td>
</tr>
<tr>
<td>2005</td>
<td>28</td>
<td>430</td>
</tr>
<tr>
<td>2013</td>
<td>28</td>
<td>380</td>
</tr>
</tbody>
</table>

Source: World Health Organization

14

AMERICAN ACADEMY OF FAMILY PHYSICIANS
Maternal Mortality

USA only developed country with rise in maternal mortality
Maternal-Child Disparities At A Glance

Countries that have lower maternal mortality ratios than the US
127 deaths per 100,000 live births in the US. 3 times as high as the government’s Healthy People 2010 target.

32.9% US cesarean rate in 2009. An all-time high following a 13 consecutive year rise.

In states with cesarean rates higher than 33%, the risk of maternal death is 21% higher than in states with cesarean rates lower than 33%.

The number of women each year who nearly die from pregnancy-related complications - one every 15 minutes.

African-American women are 3 to 4 times more likely to die from pregnancy-related causes than white women.

AMnesty International is a Nobel Peace Prize-winning grassroots activist organization with more than 3 million members, supporters, and volunteers in more than 150 countries campaigning for human rights. (The British newspaper the Guardian has praised its work as exemplary. In 2011, the organization exposed abuses, educated and mobilized the public, and worked to protect people wherever justice, freedom, truth and dignity are denied.)
Prenatal Care and Breastfeeding

Prenatal Care
• ACOG Committee Opinion 2014
• Rural vs urban
• Less access

Breastfeeding
• AA with lowest breastfeeding rate (54%) vs 74% for white Americans
Pediatric Disparities: Asthma

Blacks 2x more likely to have asthma than whites
Pediatric Disparities: Obesity

US leads developed nations in Childhood obesity
Pediatric Disparities: Obesity
Interventions That Reduce Barriers

- Affordable Care Act
- State Child vaccination programs
- Increasing affordability of healthy foods
- Interpreter services in clinics
Interventions To Improve Outcomes

- Increase family medicine workforce
- Interpreter services
- Mandatory vaccination laws
- Increase diversity in physician pool
- Increasing cultural competency
SB 277: California Vaccine Law

- Signed into law 30 June 2015 and went into effect 1 July 2016
- Protect public health by allowing only physician-ordered medical exemption as a route to circumvent the childhood vaccine requirement for admittance into any public or private day care, elementary or secondary school.
The Role of Primary Care in Reducing Disparities

- Treat disadvantaged communities
- Trained to treat patients within their context
- Improve quality of care and comprehensive delivery of care
- Policy and advocacy
Questions?
References

- http://pediatrics.aappublications.org/content/117/5/e868
- https://www.apha.org/~/media/files/pdf/topics/equity/health_equity_social_justice_apha_may_2015.ashx