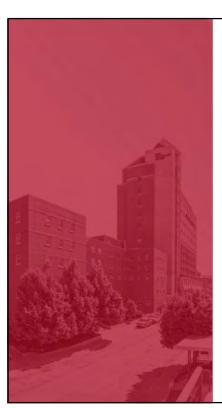
Health Equity and its Impact on Maternal and Infant Health

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Group Agreements

Speak Respectfully ■

Without shaming, blaming or fixing

Take the lessons ■

What's said here stays here

Use "I" statements

Speak your truth

■ Practice the platinum rule

Treat others the way they want to be treated

■ Take space, make space

Be here now and engage

■ Lean into discomfort

Take breaks as needed



01

Defining Health EquityClear definitions of health
equity, health disparities and
social determinants of health

02

Examining the IssuesData review and video

Data review and video screening

Small Group Discussion

Think, pair and share in small groups

Applying tools to your practice – Q&A

Time to reflect and apply concepts from today's session

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Common Language

Setting the stage with a common language allows us to set SMART health equity goals and establish a meaningful common ground.



HEALTH DISPARITIES

defined

Preventable health differences among various population groups resulting from unequal treatment and unequal health outcomes.

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HEALTH EQUITY

is achieved

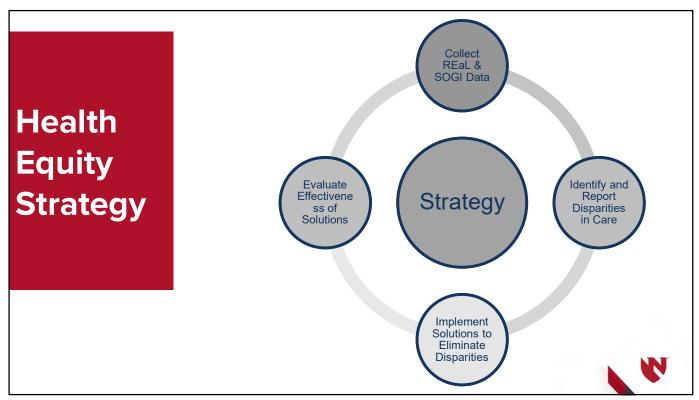
when every person can attain "full health potential" and no one is "disadvantaged from achieving this potential because of social position or other socially determined circumstances." (CDC)

SOCIAL DETERMINANTS OF HEALTH

reflect

reflect a broad range of economic and social conditions and are downstream from structural discrimination (racism, sexism, ableism, classism) and are reflected in the following domains: economic stability, education access & quality, health care access & quality, neighborhood & built environment, and social & community context.

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Q

Focusing on Maternal and Infant Health

Severe Maternal Morbidity

Maternal Mortality

Infant Mortality

Pre-Term Birth Weight

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National Data: Infant Mortality

- Non-Hispanic Black/African Americans have 2.3 times the infant mortality rate as non-Hispanic Whites.
- Non-Hispanic Black/African American infants are four times as likely to die from complications related to low birthweight as compared to non-Hispanic White infants.
- Non-Hispanic Black/African American infants had twice the sudden infant death syndrome mortality rate as non-Hispanic Whites, in 2018.
- In 2018, Non-Hispanic Black/African American mothers were twice as likely to receive late or no prenatal care as compared to non-Hispanic White mothers.

N

Source: Office of Minority Health

Nebraska Data: Infant Mortality

- Infant Mortality Rate: 5.5
- Infant Mortality Rate, Non-Hispanic White: 3.7
- Infant Mortality Rate, Non-Hispanic Black: 12.7
- Infant Mortality Rate, Hispanic: 6.2

Source: KFF; 2019





Weathering *defined*

Premature decline in health due to social, economic and political factors

"Erosion by constant stress"

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Think, Pair, Share:

- > The following slides will include questions for you to consider.
- ➤ For the first minute, please take time to reflect personally on the question.
- After personal reflection, I will prompt you all to discuss in smaller groups.



What do you believe is at the heart of the matter regarding access to health care services and quality healthcare?

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What do you believe are some of the sources of chronic stress in the lives of African Americans, particularly as it relates to infant mortality?

What role does toxic stress play in black women's lives?

How does that stress affect their babies?

How might some risks be minimized, or deaths prevented?

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Can you recall examples of other adverse racial experiences from the movie?

How has this movie influenced your thinking about the "face" of infant mortality?

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