The Black maternal health crisis is exposing cracks in our maternal and newborn care system. Addressing these fundamental issues creates a baseline system of care that benefits all women and children in the United States.

- A Black mother with a college education is at 60 percent greater risk for maternal death than a white or Hispanic woman with less than a high school education. While socioeconomic stability is normally a protective factor, race still plays the deciding role in maternal life and death;
- The Black maternal health crisis is exposing cracks in our maternal and newborn care system. Addressing these fundamental issues creates a baseline system of care that benefits all women and children in the United States;
- A Black mother with a college education is at 60 percent greater risk for maternal death than a white or Hispanic woman with less than a high school education. While socioeconomic stability is normally a protective factor, race still plays the deciding role in maternal life and death;
- In the United States, approximately 700 women die each year as a result of pregnancy or labor complications. An additional 50,000 women each year face short or long-term severe consequences to their health as an outcome of pregnancy or labor;
- In 2021, 1,205 women died in the United States as a result of pregnancy or delivery complications. An additional 50,000 women each year face short or long-term severe consequences to their health as an outcome of pregnancy or labor;
- That same year, the maternal death ratio for Black women (69.9 deaths per 100,000 live births) is nearly twice the ratio for white women (26.6 deaths per 100,000 live births) and for Hispanic women (28.0);
- Addressing social determinants is especially important for reducing rates of maternal mortality and severe maternal morbidity for Black mothers;
- Infant mortality rates for America’s Black babies are more than twice the rate of white babies; and,
- Addressing this crisis is an opportunity for the United States to address the persistent and destructive impact of institutional, historic, and systemic racism on Black women.

**OUR POSITION**

Addressing the current Black maternal mortality crisis requires a collaborative, multi-disciplinary team effort focused on reducing disparities and addressing the social determinants of health to help lower the Black maternal mortality rate (MMR). We can also ensure that infants, newborns, and children inherit the benefits of maternal care by addressing the neuro- and sociobiological threats to healthy development by extending maternal care well into the post-partum period.

**WHAT THE BILL WOULD DO:**

- Make critical investments in social determinants of health that influence maternal health outcomes, like housing, transportation, and nutrition;
- Provide funding to community-based organizations that are working to improve maternal health outcomes and promote equity;
- Comprehensively study the unique maternal health risks facing pregnant and postpartum veterans and support VA maternity care coordination programs;
- Grow and diversify the perinatal workforce to ensure that every mom in America receives culturally congruent maternity care and support;
- Improve data collection processes and quality measures to better understand the causes of the maternal health crisis in the United States and inform solutions to address it;
- Support moms with maternal mental health conditions and substance use disorders;
- Improve maternal health care and support for incarcerated moms;
- Invest in digital tools like telehealth to improve maternal health outcomes in underserved areas;
- Promote innovative payment models to incentivize high-quality maternity care and non-clinical perinatal support;
- Invest in federal programs to address the unique risks for and effects of COVID-19 during and after pregnancy and to advance respectful maternity care in future public health emergencies;
- Invest in community-based initiatives to reduce levels of and exposure to climate change-related risks for moms and babies; and,
- Promote maternal vaccinations to protect the health and safety of moms and babies.

**WHY CONGRESS SHOULD ENACT THIS LEGISLATION:**

- Scripture tells us to “if one part suffers, every part suffers with it. If one part is honored, every part shares in its joy.” 1 Corinthians 12:26. This verse teaches us that this maternal health crisis matters for everyone because we are one body in Christ. It is a call for us to honor women and families impacted by this crisis by doing our part to decrease the risk pregnancy and childbirth pose to women;
- The Black maternal health crisis is exposing cracks in our maternal and newborn care system. Addressing these fundamental issues creates a baseline system of care that benefits all women and children in the United States;
- A Black mother with a college education is at 60 percent greater risk for maternal death than a white or Hispanic woman with less than a high school education. While socioeconomic stability is normally a protective factor, race still plays the deciding role in maternal life and death;
- In the United States, approximately 700 women die each year as a result of pregnancy or delivery complications. An additional 50,000 women each year face short or long-term severe consequences to their health as an outcome of pregnancy or labor;
- In 2021, 1,205 women died in the United States as a result of pregnancy or delivery complications. An additional 50,000 women each year face short or long-term severe consequences to their health as an outcome of pregnancy or labor;
- That same year, the maternal death ratio for Black women (69.9 deaths per 100,000 live births) is nearly twice the ratio for white women (26.6 deaths per 100,000 live births) and for Hispanic women (28.0);
- Addressing social determinants is especially important for reducing rates of maternal mortality and severe maternal morbidity for Black mothers;
- Infant mortality rates for America’s Black babies are more than twice the rate of white babies; and,
- Addressing this crisis is an opportunity for the United States to address the persistent and destructive impact of institutional, historic, and systemic racism on Black women.

**HIGHLIGHT OF SUPPORTERS**

- Sojourners
- American Academy of Family Physicians
- American Association for Psychoanalysis in Clinical Social Work
- American College of Obstetricians and Gynecologists
- American Nurses Association
- American Psychological Association
- Association of Black Women Physicians
- Black Mamas Matter Alliance
- Black Women’s Health Imperative
- Center for Law and Social Policy (CLASP)
- Children’s Defense Fund
- CVS Health
- Fayetteville Police Accountability Community Taskforce
- Huggies®
- Johnson & Johnson
- Mental Health America
- National Alliance for Hispanic Health
- National Association for Rural Mental Health
- National Association of County and City Health Officials
- National Black Nurses Association
- National Council of Jewish Women
- NETWORK Lobby for Catholic Social Justice
- Religious Action Center (RAC) for Reform Judaism

**BILL SUMMARY**

**Black Maternal Health Momnibus Act**

A BILL TO END PREVENTABLE MATERNAL MORTALITY AND SEVERE MATERNAL MORBIDITY IN THE UNITED STATES AND CLOSE DISPARITIES IN MATERNAL HEALTH OUTCOMES

**ASSOCIATION CONTACT**

Lauren Reliford
Political Director
lreliford@sojo.net
202.599.9263

**CONTACT**

Sojourners
408 C Street NE
Washington, DC 20002
Phone: 202.328.8842
Fax: 202.328.8757
Website: www.sojo.net/sojoaction/vision