



# REPRODUCTIVE EQUITY NOW

## Disparities in Pregnancy Outcomes Fact Sheet

### Nationally

- The U.S. has the highest rate of maternal death among developed nations<sup>1</sup>
- Childhood poverty has been found to have long-term health implications, including disrupting neurologic, metabolic, and immunologic system development and leading to poorer developmental outcomes. One in eight children in Massachusetts live below the poverty level, including nearly one in four Black children and nearly one in three Hispanic children.<sup>2</sup>
- Infants whose mothers do not receive prenatal care are three times more likely to have a low birth weight and five times more likely to die before their first birthday. Black and Hispanic mothers in Massachusetts are less likely to report receiving adequate prenatal care than White and Asian mothers are.<sup>3</sup>
- Approximately 700 women die in the U.S. each year as a result of pregnancy or its complications. 1/3 occur during pregnancy, 56% occur during labor or within the first week postpartum, and 13% occur between six weeks and one year, underscoring the importance of access to health care beyond the period of pregnancy.<sup>4</sup>
- Black and AIAN women have pregnancy-related mortality rates that are over three and two times higher, respectively, compared to the rate for White women (40.8 and 29.7 vs. 12.7 per 100,000 live births)<sup>5</sup>
- Black and Hispanic women are at significantly higher risk for severe maternal morbidity, such as preeclampsia, which is significantly more common than maternal death.<sup>6</sup>
- Disparities in pregnancy-related deaths for Black and AIAN women increase by maternal age and persist across education levels: The rate for Black women between ages 30 to 34 widens to over four times higher than the rate for White women (48.6 vs. 11.3 per 100,000), while the rate for AIAN women in the same age group is nearly four times as high as the rate for White women (41.2 per 100,000).<sup>7</sup>
- Among women with a college education or higher, Black women have an over five times higher pregnancy-related mortality rate compared to White women. Notably, the pregnancy-related mortality rate for Black women with a completed college education or higher is 1.6 times higher than the rate for White women with less than a high school diploma.<sup>8</sup>
- Black, AIAN, and NHOPI women have higher shares of preterm births, low birthweight births, or births for which they received late or no prenatal care compared to White women. NHOPI women are five times more likely than White women to not begin receiving prenatal care until the third trimester

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<sup>1</sup> Brent Kirby, [SMFM Scorecard: 2020 | SMFM.org](#) - The Society for Maternal-Fetal Medicine, Smfm.org (2020).

<sup>2</sup> Stephanie Anthony et al., [Racism and Racial Inequities in Health: A Data-Informed Primer on Health Disparities in Massachusetts](#), (2021).

<sup>3</sup> *Id.*

<sup>4</sup> [Racial Disparities in Maternal and Infant Health: An Overview](#) - Issue Brief, KFF (2020).

<sup>5</sup> *Id.*

<sup>6</sup> *Id.*

<sup>7</sup> *Id.*

<sup>8</sup> *Id.*



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or to not receive any prenatal care at all (20% vs. 4%). Hispanic women also are twice as likely compared to White women to have a birth with late or no prenatal care compared to White women (8% vs. 4%).<sup>9</sup>

- Teen pregnancy also is associated with increased risk of complications during pregnancy and delivery, including preterm birth. Teen birth rates are higher among Black, Hispanic, AIAN, and NHOPI teens compared to their White counterparts.<sup>10</sup>
- Infants born to Black and NHOPI women are over twice as likely to die relative to those born to White women (10.8 and 9.4 vs. 4.6 per 1,000), and the mortality rate for infants born to AIAN women (8.2 per 1,000) is nearly twice as high. Data also show that fetal death or stillbirths—that is, pregnancy loss after 20-week gestation—are more common among Black women compared to White and Hispanic women
- Women of color are at increased risk of being uninsured prior to their pregnancy and many lose coverage at the end of the 60-day Medicaid postpartum coverage period.
- In one study, Indigenous, Hispanic, and Black women reported significantly higher rates of mistreatment (such as shouting and scolding, ignoring or refusing requests for help) during the course of their pregnancy. Even controlling for insurance status, income, age, and severity of conditions, people of color are less likely to receive routine medical procedures and experience a lower quality of care.

## Massachusetts

- In MA in 2015, preterm birth was highest among Black non-Hispanics, followed by Hispanics, Asian non-Hispanics, and White non-Hispanics.<sup>11</sup>
- According to Massachusetts PRAMS survey estimates, in 2014 only 59% of mothers with MassHealth were breastfeeding at eight weeks postpartum, compared with 81% of mothers with private health insurance.<sup>12</sup>
- Data from the 2016 National Immunization Survey indicate that only 28% of WIC participants in Massachusetts were breastfeeding at six months postpartum, compared to 68% of Massachusetts mothers overall, falling short of the Healthy People 2020 goal of 60.6%.<sup>13</sup>
  - While Massachusetts has achieved a 2.6% annual decline in the IMR from 2005 to 2014 and currently has the lowest IMR in the nation, racial/ethnic disparities persist. In 2014, the IMRs for Black non-Hispanics and Hispanics were 2.1 and 1.5 times that of White non-Hispanic infants, respectively.
  - The five-year average annual SUID (sudden unexplained infant death) rate (2010-2014) among Black non-Hispanic infants was two times the rate of White non-Hispanic infants.

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<sup>9</sup> *Id.*

<sup>10</sup> *Id.*

<sup>11</sup> [Maternal, Infant, and Child Health](#), Massachusetts State Health Assessment

<sup>12</sup> PRAMS Massachusetts Massachusetts Department of Public Health Bureau of Family Health and Nutrition Office of Data Translation Massachusetts Pregnancy Risk Assessment Monitoring System (PRAMS) [2012-2016 Surveillance Report](#), (last visited Aug 17, 2022).

<sup>13</sup> [Maternal, Infant, and Child Health](#), Massachusetts State Health Assessment.