

9/10/2021

The Honorable Gavin Newsom
Governor of California
State Capitol
Sacramento, CA 95814

Re: SB 65 (Skinner) – California Momnibus – Request for Signature

Dear Governor Newsom:

On behalf of the BLACK Wellness & Prosperity Center (BWPC), I am writing in support of SB 65 (Skinner) which would re-imagine maternal health to improve perinatal outcomes, close racial disparities in maternal and infant mortality and morbidity, and improve data collection and research on socioeconomic factors that contribute to negative birth outcomes. Although we have had several elements of SB 65 included in the California Budget, there is still important work to do.

BWPC is a research-driven social enterprise founded to make equitable policies and programs more effective. BLACK Wellness and Prosperity Center promotes Belonging, Love, Affinity, Community, and Kinship. We are a catalyst to improve well-being and prosperity in the Black community with sustained efforts to improve Black Maternal and Child Health outcomes, and effectively unite and elevate the Black voice, and build sustainable infrastructure to strengthen Black capacity.

BWPC is the first Black Maternal Child Health CBO in Fresno County established to unapologetically serve the unmet needs of African American women and babies.

Although California has reduced the rates of maternal mortality over the past 30 years, mortality and morbidity for Black and Indigenous/Native American pregnant people, women, and infants remain considerably higher than the state's average. Research points to structural racism, as well as socioeconomic factors contributing to the racial and geographic disparities seen in birthing outcomes of people of color.

Between 2014 and 2016, the ratio of death for Black women was 56.2 per 100,000, almost 6 times higher than that for white women. Meanwhile, California's infant mortality rate is 4.2 per 1000 live births, lower than the national average of 5.7. However, a closer look at the numbers demonstrates sharp racial disparities. Indigenous/Native American infants in California die at a rate of 11.7 per 1000 live births, followed by Black infants who die at a rate of 8.7 per 1000 live births. Higher numbers of Black, Asian, and Pacific Islander pregnant and postpartum people report unfair treatment, harsh language, and rough handling during their labor/delivery hospital stay, as compared to white pregnant and postpartum people. Higher numbers of pregnant and postpartum people who speak an Asian Language or Spanish at home also report unfair treatment during their labor/delivery hospital stay, as compared to pregnant and postpartum people who speak primarily English at home.

In addition, California is heading towards a maternal health crisis, with critical shortages in maternity providers predicted by 2025. Currently California has nine counties that do not have a single OBGYN. Access to midwifery has been noted by leading national and

international maternal health organizations as a key strategy in improving patient outcomes and reducing racial disparities in birth outcomes. As it is right now, California only has two nurse midwifery programs in the entire state, and only one direct entry midwifery program, approved by their respective state licensing boards. It is becoming increasingly difficult for these programs to expand the midwifery workforce in California to meet the demand in maternity care deserts and low access areas. There are currently no state programs to support midwifery education and expansion like there are for programs that train family practice physicians, nurse-practitioners, and physician assistants.

SB 65 will address these issues by:

1. Codifying and expanding the powers and protections for California's Pregnancy-Associated Mortality Review Committee including having the committee review cases of maternal mortality and morbidity; racial and socioeconomic disparities; Queer, Trans, and Gender Non-Conforming birthing outcomes; the impact of global warming on pregnancy outcomes; as well as make recommendations on best practices.
2. Updating data collection and protocols for counties participating in the Fetal and Infant Mortality Review Process and requiring counties to meet a specified criteria to participate.
3. Clarifying that pregnant people are exempt from CalWORKs welfare-to-work requirements.
4. Building the midwifery workforce by establishing a fund for midwife training programs that prioritize admitting underrepresented groups and those from underserved communities, or who prioritize training and placement of graduates in maternity deserts or areas of reduced maternity care access.
5. Establish a stakeholder workgroup to aid in the implementation of the new Medi-Cal doula benefit set to start next year.

Because many elements of SB 65 were incorporated into the recently passed California budget, some of the original parts of the bill have been removed. However, we still urgently need to address the important issues described above. For these reasons, we proudly support SB 65 and ask for your signature.

Sincerely,

Shantay R. Davies-Balch
President and CEO
BLACK Wellness & Prosperity Center