

BLACK MATERNAL HEALTH CIRCLES

Listening session eligibility criteria:

- Black women (18-42 years old) who are currently pregnant or were pregnant in the past 3 years
- Live in Kern or San Bernardino Counties

Data on Black individuals in California show that there is a persistent Black maternal and infant health crisis. Every year we lose Black women and babies to **preventable deaths** at disproportionately higher rates compared to White women. The outcome that Black women six times are more likely to die from pregnancy and birth complications cannot be attributed to age, or social or economic status. Statewide, Black babies also die more than twice the rates of their counterparts.

These strong disparities in birth outcomes are direct results of systems inequalities, among which **(1)** access to high quality health care facilities, **(2)** discrimination, and **(3)** implicit bias being the most significant.

Solution

The Black Maternal Health Circles is a year-long coordinated effort between Blue Shield of California (BSC) and BLACK Wellness and Prosperity Center (BWPC) to develop solutions to address these health inequalities. Between November 2021 and April 2022, we will be conducting topic-specific listening sessions with a minimum of 45 Black women with pregnancy experience residing in **Central and Southern California** to better understand what it means to be a Black birthing person in the region.

We will gather qualitative information about interactions with healthcare providers, health plan experiences, and the participants' knowledge of available BSC resources and experience with those materials. Through the sessions, not only do we wish to gain patient perspectives, but we also aim to create a space where Black women will be listened to and validated to advocate for themselves and their health in health care settings.

Impact

In the last five months of this effort, we will elevate the Black voice to improve maternal and infant outcomes. Based on the shared learnings, we will **build** conversation with providers and health plans about making access to healthcare not only equitable, but culturally aware of the unique needs and issues Black birthing persons experience in these shared spaces.

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