



Senator Holly J. Mitchell

SB 464 – Dignity in Pregnancy and Childbirth Act

THIS BILL

SB 464 will require all healthcare providers involved in perinatal services at hospitals and alternative birth centers to undergo evidence-based implicit bias training. The bill will also require the California Department of Public Health to track and publish maternal mortality and morbidity rates, including information about the underlying causes and the racial or ethnic identities of patients. Finally, the bill will adopt the U.S. standard death certificate format regarding pregnancy to better capture information about maternal mortality.

PROBLEM

The United States has the highest maternal mortality rate in the developed world. Every year, more than 700 women die from childbirth, and another 50,000 suffer from severe complications. In California, the rate of maternal mortality has decreased by 55% since 2006. However, for women of color, particularly Black women and foreign-born Latinas, the maternal mortality rate remains 3 to 4 times higher than white women. Although Black women make up only 5% of the birth cohort in California, they comprise 21% of the pregnancy-related deaths.

Unlike with other health disparities, socioeconomic status, access to prenatal care, education level, and general physical health do not explain the disparity seen in Black women's maternal mortality and morbidity rate. In fact, middle to high-income Black mothers have worse birthing outcomes than white women in abject poverty. Furthermore, Black women who are non-smokers have worse birthing outcomes than white women who smoke a cigarette every day. Evidence points to implicit bias as one of the causes for the wide disparities seen between Black women's maternal mortality numbers and other ethnicity groups. In fact, a 2016 study by University of Virginia researchers found that white medical students believed biological myths about racial differences in patients, including that Black patients have less sensitive

nerve endings, are able to tolerate more pain, and have thicker skin than their white counterparts.

SOLUTION

The Dignity in Pregnancy and Childbirth Act aims to reduce pregnancy-related preventable deaths, severe illnesses and associated health disparities by addressing implicit bias among perinatal health providers. The training program will task medical professionals to identify and correct any previously or current unconscious or conscious biases and misinformation. They will also address personal, interpersonal, institutional, structural, and cultural barriers to access to health care.

Additionally, by aligning CA death certificate formats with the federal standards, which specify whether the decedent was pregnant at death or within 42 -365 days of death, the California Department of Public Health can resume collecting and publishing data on maternal mortality and severe morbidity.

By preparing perinatal medical providers to better care for mothers in some of the most vulnerable moments in their lives, SB 464 will preserve lives so that childbirth remains a joyful moment for all mothers, and not a life-threatening event for Black and foreign-born Latina mothers.

California has plenty of reasons to celebrate the recent downward trend in maternal deaths, but we cannot afford to celebrate that trend until it is fully inclusive and all women are benefitting from the important changes in our health care system.

SUPPORT/OPPOSE

ACT for Women and Girls
Black Women for Wellness
NARAL Pro Choice California
Western Center on Law & Poverty

FOR MORE INFORMATION

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