

What We Know

The Story that Data is Telling Us about Maternal Health in Nebraska

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National Maternal Health Reality

- Unfortunately, the story of Maternal Mortality in the US (backed by data) shows that we, as a system, are failing our people.
- Approximately 700 women die annually as a result of pregnancy related issues or complications.
 - 1/3 during pregnancy
 - 1/3 during labor or within first week postpartum
 - 1/3 within first year postpartum



Maternal Health in Nebraska

Birth Outcomes: Nebraska in Comparison

Relative to other states in the Midwest and nationally, Nebraska has high rates of overall maternal mortality, care deserts, disparities for Black and Native infants, and vulnerabilities in reproductive healthcare access.

Nebraska has the second-highest rates is the U.S. of:

a) maternity care deserts and b) disparity between Black and white infant mortality rates

Criteria		Kansas	lowa	Nebraska	National
	Maternal Mortality Rates	21.7	9.4	28.2	20.4
	Maternity Care Deserts	48.57%	35.35%	70.97%	34.9%
Birth Equity	Biggest Maternal Vulnerability Drivers	Reproductive Healthcare (76)	Reproductive Healthcare (58)	Reproductive Healthcare (84)	
	Infant Mortality Rates - Overall	6.7	4.3	5.5	5.4
	Infant Mortality Rates – Black or African-American	11.8	9.3	12.7	10.5
	March of Dimes Report Card 2022 and Preterm Birth Rate	C grade (9.8%)	C Grade (10%)	D Grade (10.8%)	C-
	Preterm Birth Rates by Race/Ethnicity	14.2% for Black infants, 10.2% for AI/AN	12.9% for Black infants, 12.7% for AI/AN	15.3% for Black infants, 13.4% for Al/AN	-

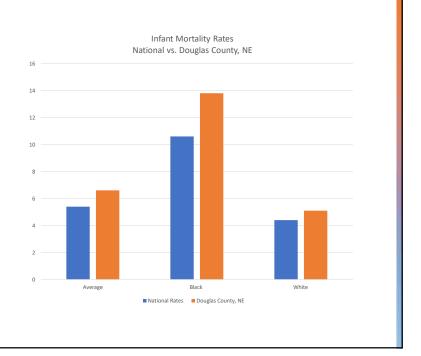
Sources: CDC; March of Dimes Report Card; Maternal Vulnerability Index, Surgo Ventures

Concerning data

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Maternal Health in Nebraska

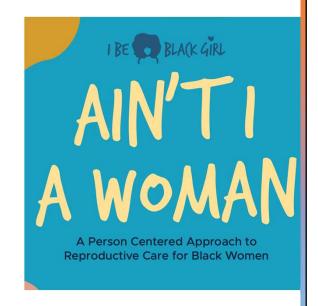
- Infant mortality data at the county level reveal a striking disparity.
- Maternal Health and infant health outcomes such as infant mortality are directly correlated.



Vital Data in Community Voice

Qualitative Research on the reproductive health experience of Black women in NE (Omaha, primarily).

- What's been working well in relationships with practitioners
- Distressing realities while interfacing with healthcare system
- Psychosocial Implications



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Distressing Reality

In this research, participants shared how instances of hording power and not communicating effectively impacted their health and well being.

"A week and a half after I gave birth, I went back to the ER. They didn't listen to me when I said I didn't feel like what I was experiencing was normal. They did three separate vaginal checks on me, and when the fourth person came in, I said no. You guys aren't communicating to each other. I just gave birth and nobody is listening to me. He left, saying he would come back. The only person who came back was the nurse and she had someone write me a prescription for Percocet for the pain. But since I was breastfeeding, I felt that was inappropriate. None of it was okay, but I was young, and didn't know how to communicate it..."

Challenges to Accessing Quality Care

- Not feeling like the healthcare provider was listening
- Lack of autonomy in birthing experience
- Perceiving bias from healthcare provider
- Lack of access to healthcare providers of color
- Needing a decision-making partner

"It scares me, the infant mortality rate for Black women scares me. The way you still hear Black women being treated while giving birth is scary. When it's celebrities and you're like oh shoot, if that's how they treat this person, what hope do I have of having? You just keep fingers crossed that I come out of this okay that I'll

just keep fingers crossed that I come out of this okay that I'll survive and that my child survives. No woman should have to feel like that, of any color."

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When Trust is Present

Black Women want a relationship with healthcare providers that is built on on trust.

"He genuinely cares. He gives you the cut and dry, even if it's something that's scary. It's like, hey, this is a possibility, it might not happen, but it can happen. Just throwing that out there. He's very open with everything, and it's not just a 'this is what I just read right here', or 'this is what is common for everyone else', so here you go, deal with that."





Touch of Gold

A local nonprofit organization focused on the elimination of preventable causes of maternal and infant mortality in Black Communities.

- Infant Feeding Education & Support
- Perinatal Education & Support
- Building a Village



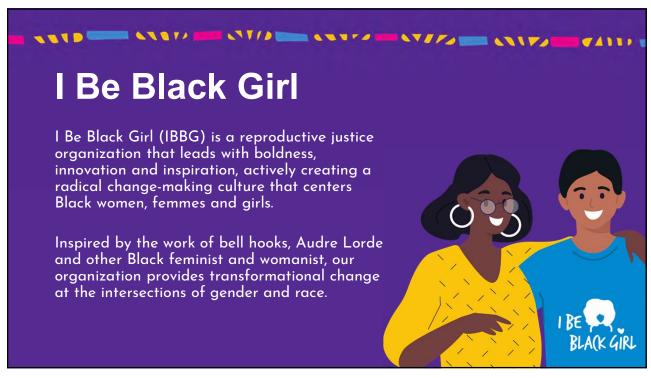
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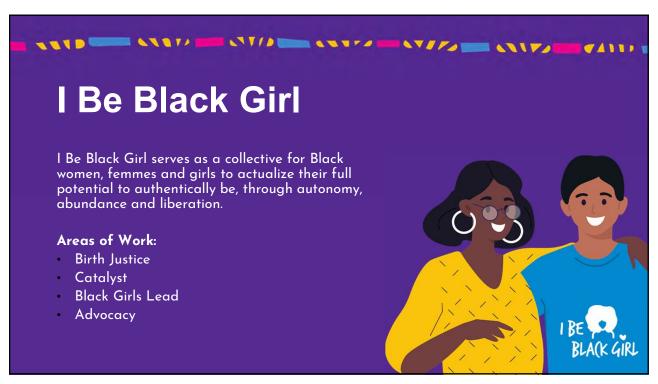
A Mother's Love

Mission: To Love, Support and Empower our birthing community by providing strategies for coping with life challenges by offering instruction in everyday living while establishing connections to resources to impact future generations.

- Doula Services & Support
- Teen Pregnancy Support
- Parenting Classes
- CPR Training









I Be Black Girl serves as a collective for Black women, femmes and girls to actualize their full potential to authentically be, through autonomy, abundance and liberation.

Birth Justice Catalyst

Leadership Policy & Advocacy



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WINS for Maternal Health in Nebraska

Postpartum Medicaid Coverage extended from 60 days to 12 months IBBG is awardee for federal State Maternal Health Innovation Program through HRSA



Where We Can Go

Recommendations and Opportunities for Transforming the Landscape of Maternal Health in Nebraska

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Recommendations for Moving Ahead



Power Sharing



Centering Community



Commitment



Innovative Solutions





Thank You! CONNECT WITH US

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