

Study finds Black women prefer Black obstetric providers due to experiences of discrimination and fear

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Data from the Centers for Disease Control and Prevention demonstrate that Black women in the United States are three times more likely to die

from a pregnancy-related cause than are white women. Health disparities among people of color are the result of broader social and economic inequities rooted in racism and discrimination.

In a new study to be presented at the Society for Maternal-Fetal Medicine's (SMFM) annual meeting, The Pregnancy Meeting, researchers will unveil findings that suggest that pregnant people who are Black may prefer to have an obstetrician who is also Black. The abstract was published in the January 2024 supplement of the [*American Journal of Obstetrics and Gynecology*](#).

The [qualitative study](#) explored Black birthing people's lived experiences with obstetric care and their perspectives on having an obstetric care provider who is also Black.

Researchers conducted 16 one-on-one interviews and five focus groups with individuals who self-identified as Black or African American. The researchers who conducted the interviews and focus groups also identified as Black women. The mean age of the study's 32 participants was 34, nearly two-thirds (63%) were married, and nearly three-quarters (72%) had a bachelor's degree or higher.

Five common themes emerged during the interviews:

1. Participants' desire for a Black obstetric care provider
2. Their difficulty finding a Black obstetric care provider
3. Their experiences of being stereotyped while receiving obstetric care
4. Their feelings about not being heard by obstetric providers and health care staff
5. Their fear of dying while pregnant or during childbirth.

A sampling of participant responses:

- "I was actually a little hesitant to see the providers who were white...because of the...discrimination that I have experienced throughout my lifetime and the discrimination that I see my friends and my family experience...."
- "I did not feel heard. I didn't feel like they were taking me seriously."
- "This one nurse...kept asking me, 'Do I need a social worker?' 'Do I need WIC [a federal government that provides assistance to low-income pregnant women, infants, and children]?' And I'm like, what, what in my profile is making you ask these questions, are these normal questions? Or are you asking me this because I'm Black?"

"There has been a lot of research describing racial disparities in obstetric outcomes," says the study's lead author Nicole Teal, MD, MPH, who is currently a maternal-fetal medicine subspecialist at UC San Diego Health and assistant professor of Obstetrics, Gynecology, and Reproductive Sciences at University of California San Diego School of Medicine, though her research was conducted when she was a maternal-fetal medicine fellow at the University of North Carolina at Chapel Hill.

"What is novel about our study is there is very limited rigorous research looking at the issue from the patient perspective and what increased diversity in obstetric providers might mean for [health outcomes](#) for Black birthing people," said Teal.

"Our findings suggest increasing racial diversity among providers may be one strategy to address inequities in [obstetric care](#). Other strategies recommended by our study participants included increasing continuity with prenatal care providers, eradicating stereotypes of Black mothers, and increasing respectful care in general."

More information: E. Nicole Teal et al, 64 Exploring Black birthing

people's perspectives on racial concordance with obstetric care providers, *American Journal of Obstetrics and Gynecology* (2024). DOI: [10.1016/j.ajog.2023.11.085](https://doi.org/10.1016/j.ajog.2023.11.085). [www.ajog.org/article/S0002-9377 ... \(23\)00887-6/fulltext](http://www.ajog.org/article/S0002-9377(23)00887-6/fulltext)

Provided by Society for Maternal-Fetal Medicine

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