



Community Health Commission

CONSENT CALENDAR
May 14, 2019

To: Honorable Mayor and Members of the City Council
 From: Community Health Commission
 Submitted by: May Simpson, Chairperson, Community Health Commission
 Subject: Declaring every 3rd Sunday in May to be Postpartum Justice Day in the City of Berkeley

RECOMMENDATION

Adopt a resolution declaring every third Sunday in May to be Postpartum Justice Day in the City of Berkeley to support and encourage the needed work to achieve equity and justice in maternal health.

FISCAL IMPACTS OF RECOMMENDATION

None.

CURRENT SITUATION AND ITS EFFECTS

Postpartum realities in the United States

1. There has been a 25% increase in maternal deaths in the US in the past 20 years.
2. Racial disparity in maternal deaths is historical and has persisted. 2006-2015, a black mother in NY City has a 12 times higher risk of maternal death compared to a white mother.
3. Top four causes of maternal death: cardiovascular diseases, other medical conditions, infection, and hemorrhage.
4. 1970-2012, Caesarean-section rates increased 6 times; Caesarean delivery was associated with a 3.01-fold increase in the risk of maternal death compared with vaginal delivery.
5. For every maternal death, there are 60-70 maternal near-deaths.
6. 70%-80% of new mothers will experience the baby blues.
7. US is the only industrialized country without a national paid maternity leave policy.
8. Nearly 1 in 4 mothers return to work within 2 weeks of giving birth.
9. 54.9% of women (ages 15-44) had given birth but the postpartum experience is nearly invisible in the US culture.
10. Modern day gynecology was founded on inhumane experimentation on enslaved black women.

BACKGROUND

Based on available data and studies on the root causes of Black and indigenous maternal health disparities, the definition of Postpartum Justice has only recently been formulated:

Postpartum Justice is the set of values forming the foundation of postpartum care that is fair and equitable. It is free from sexism, racism and a health care system that is based on profit. Postpartum Justice recognizes society's collective responsibility for all parents of new babies. It distills the postpartum wisdom of the past and transforms it to serve the future.

Much needs to be done to mitigate and rectify the inequities. There is a growing movement in postpartum justice (including the formation of black doula collectives to statewide projects to advance equities). The first steps for the City of Berkeley to take are to recognize the crisis, to declare a need to address the inequities and to give the campaign a battle cry: Postpartum Justice. Declaring the Sunday after Mother's Day to be Postpartum Justice Day will call attention to the City of Berkeley's intention to honor the vulnerable period of time after giving birth in the lives of parents of new babies.

The Community Health Commission passed the following motion at the March 28, 2019 meeting:

M/S/C (Smart/Rosales): adoption of a resolution declaring every 3rd Sunday in May to be Postpartum Justice Day in the City of Berkeley.

Ayes: Webber, Speich, Futoran, Carter, Smart, Spigner, Rojas-Cheatham, Simpson, Rosales, Katz; **Noes:** None; **Absent from vote:** Engelman, Le.

ENVIRONMENTAL SUSTAINABILITY

There are no identified environmental impacts with this agreement.

RATIONALE FOR RECOMMENDATION

United States as a nation has long identified the elimination of health disparities as its number one national public health goal. The City of Berkeley is a partner in this effort.

One of the most glaring examples of disparities in this past decade is the maternal mortality rates of black and indigenous communities. Furthermore, these rates continue to climb while much of the rest of the world is experiencing a decline.

The City of Berkeley should stand in the forefront to fight and to call attention to injustice.

ALTERNATIVE ACTIONS CONSIDERED

- Home visits for all Berkeley families with newborns.
- Paid doula services for all low-income birthing people.
- Establish a city-wide policy of providing 6 weeks to 6 months of paid family leave.

CITY MANAGER

The City Manager concurs with the content and recommendations of the Commission's Report.

The resolution aligns with the City of Berkeley's Strategic Plan with the goal of championing and demonstrating social and racial equity. In addition, it aligns with the City of Berkeley Public Health Division's goal to decrease disparities and inequities in Berkeley.

CONTACT PERSON

Roberto A. Terrones, MPH, Commission Secretary, (510) 981-5324

Attachments:

1: Resolution

Exhibit A: References

Exhibit B: Healthy People 2020

Exhibit C: Health inequities in the black communities in the city of Berkeley

RESOLUTION NO. ##,###-N.S.

DECLARING EVERY THIRD SUNDAY IN MAY TO BE POSTPARTUM JUSTICE DAY

WHEREAS, the United States has identified the elimination of health disparities as its number one public health goal in its Healthy People 2020 policy declaration; and

WHEREAS, the City of Berkeley is a partner in this effort; and

WHEREAS, maternal mortality continues to impact black and indigenous communities disproportionately; and

WHEREAS, racial disparities in pregnancy outcomes are historical and persistent in the U.S. as well as in California; and Black women are almost 4 times more likely to die in childbirth compared to white women regardless of economic and social status; and

WHEREAS, according to the Center for Disease Control, between 2000 and 2014, while other industrialized nations have continually improved their birth outcomes, in the U.S., there has been a 26.6% increase in birth-related deaths; and

WHEREAS, for every birth-related death there are also 60-70 birthing people who suffer serious complications which can result in long term and life altering health changes; and

WHEREAS, postpartum care is a critical period for new parents and their children and proper attention can ensure well-being and long-term positive health outcomes; and

WHEREAS, the US is the only industrialized country without a national paid maternity leave policy; and nearly 1 in 4 new moms in the US return to work within 2 weeks of giving birth; and

WHEREAS, the term postpartum period refers to the six weeks after childbirth; and

WHEREAS, postpartum justice is the set of values forming the foundation of postpartum care that is fair and equitable; and it is free of sexism, racism, homophobia, transphobia, and not based on a healthcare system that is profit-driven;

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that it will declare every third Sunday in May to be "Postpartum Justice Day" in the City of Berkeley to promote and to support the nation's Healthy People 2020 objective to eliminate health disparities and specifically to address the maternal health crisis in the United States.

Exhibits

Exhibit A: References

Exhibit B: Healthy People 2020

Exhibit C: Health inequities in the black communities in the city of Berkeley

References

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What are the national health goals of the United States?

Healthy People 2020

“During the past 2 decades, 1 of *Healthy People’s* overarching goals has focused on disparities. In *Healthy People 2000*, it was to reduce health disparities among Americans. In *Healthy People 2010*, it was to eliminate, not just reduce, health disparities. In *Healthy People 2020*, that goal was expanded even further: to achieve health equity, eliminate disparities, and improve the health of all groups.

Healthy People 2020 defines *health equity* as the “attainment of the highest level of health for all people. Having health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and health care disparities.”⁵

Healthy People 2020 defines a *health disparity* as “a particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage. Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”⁶

Over the years, efforts to eliminate disparities and achieve health equity have focused primarily on diseases or illnesses and on health care services. However, the absence of disease does not automatically equate to good health.

Powerful, complex relationships exist between health and biology, genetics, and individual behavior, and between health and health services, socioeconomic status, the physical environment, discrimination, racism, literacy levels, and legislative policies. These factors, which influence an individual’s or population’s health, are known as *determinants of health*.

For all Americans, other influences on health include the availability of and access to:

A high-quality education

- Nutritious food
- Decent and safe housing
- Affordable, reliable public transportation
- Culturally sensitive health care providers
- Health insurance
- Clean water and non-polluted air

Throughout the next decade, *Healthy People 2020* will assess health disparities in the U.S. population by tracking rates of illness, death, chronic conditions, behaviors, and other types of outcomes in relation to demographic factors including:

- Race and ethnicity

- Gender
- Sexual identity and orientation
- Disability status or special health care needs
- Geographic location (rural and urban)

HEALTH INEQUITIES IN BERKELEY - *City of Berkeley Health Status Summary Report 2018:*

(No maternal mortality data were cited in the City of Berkeley Health Status Summary Report.)

Chapter 1: Sociodemographic Characteristics & Social Determinants of Health	Chapter 2: Pregnancy & Birth	Chapter 3: Child & Adolescent Health	Chapter 4: Adult Health	Chapter 5: Life Expectancy & Mortality
Families headed by a White householder earn 3.4 times more than African American families, 1.9 times more than Latino families, and 1.4 times more than Asian families.	The risk of an African American mother having a LBW baby is 2.5 times higher than the risk for White mothers.	African American children (under 18) are 7 times more likely, Latino children are 5 times more likely, and Asian children are 2 times more likely than White children to live in poverty.	African Americans are 3 times more likely than Whites to be hospitalized due to coronary heart disease.	African Americans are 2.3 times more likely to die in a given year from any condition compared to Whites.
The proportion of families living in poverty is 8 times higher among African American families, 5 times higher among Latin families and 3 times higher among Asian families, compared to White families.	The risk of an African American mother having a premature baby is 2 times higher than the risk for White mothers.	African American high school students are 1.4 times more likely than White students to drop out of high school.	African Americans are 34 times more likely than Whites to be hospitalized due to hypertension.	African Americans are 2.0 times more likely than Whites to die of cardiovascular disease.
African Americans are 2.8 times less likely, Latinos are 1.6 times less likely and Asian children are 1.1 times less likely than Whites to have a bachelor's degree or higher.	The teen birth rate among African Americans is 9 times higher, and among Latinas is 3 times higher than the rate among White teens.	The asthma hospitalization rates for children under 5 for African American children is 10 times higher, and for Latino children is 2.8 times higher than the rate among White children.	African American women are 1.5 times more likely than Whites to be diagnosed with breast cancer.	African Americans are 1.8 times more likely than Whites to die of cancer.

