



# Introduction: The Quest for Birth Equity and Justice—Now is the Time

Fleda Mask Jackson<sup>1</sup> · Allison Bryant<sup>2</sup> · Kimberly D. Gregory<sup>3</sup> · Rachel Hardeman<sup>4</sup> · Elizabeth A. Howell<sup>5</sup>

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Emerging approaches for identifying and ameliorating racial disparities in maternal and infant outcomes have arisen in response to heightened demands for achieving the goal of maternal and birth equity. This imperative has been escalated by the devastation of the twin pandemics of Covid-19 and the unrest resulting from police and community violence spotlighting the racial inequities in health care and determinant conditions. The present quest for birth equity and justice is a call for new pathways of inquiry with expanded and novel methodologies, culturally respectful standards for quality care and a commitment to inclusion and diversity as critical elements for transformative change.

Current research on Black maternal outcomes builds upon decades of investigations illustrating the fatal and health-threatening consequences of structural, systemic and interpersonal racism. Beginning with the research of W.E.B. Dubois to the analysis of Harriet Washington and to the more recent work of David Williams, there is little doubt that racism embedded in the lived experiences of Black women and in the health care they receive places Black expectant mothers, birthing people and their babies in jeopardy (Dubois, 2003; Washington, 2006; Williams et al., 2019). Regardless of educational background, Black women remain at the highest rates of adverse maternal and birth outcomes. It has been thirty years since Schoendorf and colleagues revealed that having a college diploma and the employment and income commensurate with a college degree were not as protective for the birth outcomes of Black women as previously presumed (Schoendorf et al., 1992). The results from a CDC study reported in 2019 also revealed that well-educated

Black women bear the burden of higher rates of maternal mortality and morbidity, far more than White women with only a high school diploma (Petersen et al., 2019).

We acknowledge both the ill-effects of the intersection of multiple forms of identity-based discrimination, especially racism and sexism, and resilience and resistance within communities as significant for maternal and birth outcomes (Jackson et al., 2012). This viewpoint has stimulated the use of exploratory methods for giving voice to the lived experiences of those most impacted by higher maternal mortality and morbidity. The necessity of cultural, racial and gendered resonance for providing care, conducting research and creating policy also offers guidance regarding the identity and perspectives of researchers and providers. Race matters; therefore, in addition to research skills and expertise, diverse researchers and in particular Black investigators bring to the work insightful perspectives and knowledge from their own lived experiences as members of those communities impacted by excess maternal mortality and morbidity. With recognition of the added health risk for Black people because of racism, Black investigators likely bring an understanding of critically-valuable protective elements within Black communities as well. Their lived experiences must be acknowledged and included as imperative for inquiry and the interpretation and implementation of research findings.

This special edition of *Maternal and Child Health Journal* with its focus on Black maternal health was created to bring together qualitative and quantitative research, intervention evaluation, policy analysis and commentary on the current state of Black maternal health care and outcomes. It is a space for new thoughts, alongside foundational frameworks, in the ever expanding approaches for interrogating the causes and solutions for Black maternal mortality. Notably, the intergenerational contributors for this volume represent different career stages: from early investigators to well-established researchers. Among the articles within this edition are discussions on how race and racism shape birthing experiences; maternal mental health care; implicit bias training; fatherhood; community collaboration; and Black boy birthing joy. The work presented in this volume articulates the

✉ Fleda Mask Jackson  
fledamjackson@gmail.com

<sup>1</sup> Majaica, LLC, Atlanta, GA, USA

<sup>2</sup> Massachusetts General Hospital, Boston, MA, USA

<sup>3</sup> Cedar-Sinai Medical Center, Los Angeles, CA, USA

<sup>4</sup> University of Minnesota, Minneapolis, MN, USA

<sup>5</sup> University of Pennsylvania, Philadelphia, PA, USA

link between inequity in the social determinants, quality of care and poor maternal and infant outcomes. Context matters and so included is analysis of the effects of Covid-19 on Black births as an added layer to the existing inequities resulting in disparate health outcomes.

The wide range of themes are interconnected by a fundamental quest for justice and equity in the quality of maternal health care; in the distribution of social determinants; and in representative diversity in the creation and advancement of theoretical frameworks as the drivers for research, practice and policy. It is our hope that this special edition will not only generate new lines of inquiry but most important advance the systemic changes required to reach the destination of equitable Black maternal and birth outcomes.

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