



Editors' Notes

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### Keywords

birth equity; maternal health; health equity; maternal and child health; maternal mortality; maternal morbidity



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The National Maternal Health Research Network collaborated with the *Journal of Health Disparities Research and Practice* to sponsor a special issue about Birth Equity, featuring manuscripts written by its members. Birthing is a culturally intimate experience typically involving partners, parents, family members, friends, and community members. The providers assisting birth play a very important role in ensuring a safe and respectful childbirth. This special issue focuses on topics that describe these birthing experiences, highlight data, share solutions to make the birth experience more equitable such as providing telehealth, and describes how systemic racism affects lactating individuals.

In the United States, infant and maternal mortality have steadily climbed over the last two decades, particularly among Black, American Indian/Alaska Native, and individuals residing in rural areas. According to the CDC, 2 to 3 pregnant people die daily—more than 700 deaths annually—from pregnancy or delivery complications, making the U.S. one of the most dangerous countries to deliver birth despite the advancements in healthcare innovation (CDC, n.d.). The United States performs the worst among other industrialized nations when considering birth-related outcomes although it spends more per capita on health care – more than any other high-income country. There are myriad reasons why the United States performs so poorly, with some of the explanations focusing on the lack of a centralized healthcare system.

In this special issue, we share learnings from a 2-year collective impact project that led to the development of a multipart patient-centered and-prioritized agenda that could inform advocacy and research activities. The project also developed a working definition of Birth Equity that its members felt was important to create and operationalize in their respective work. A certified lactation specialist shares their perspective about how Black mothers are impacted by the historical legacy of American chattel slavery and corroborating systems in initiating and sustaining breastfeeding due to generational trauma. A researcher shares their findings from a qualitative

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study surveying the feasibility of implementing mental health interventions in neighborhood assets such as barber shops and beauty salons.

The COVID-19 pandemic laid bare inequities in healthcare services provided to poor communities across the United States. Telehealth quickly emerged as an option to ensure safe and accessible medical care. Providers and researchers share their findings from a survey evaluating an implemented telehealth clinical protocol to improve birth outcomes. A team of researchers share their findings from a study which assessed attitudes pertaining to vaccine uptake during the pandemic and offer recommendations to focus on vaccine hesitancy.

Housing is a social determinant of health and not having safe and affordable housing negatively affects health and wellbeing. An interprofessional healthcare team designed a program, Motherhood Together, to better support pregnant people facing housing insecurity. They share their findings from the evaluation of the program which highlights the effect of the program on infant outcomes, health literacy, and maternal self-care. An annual celebration, Celebrate Day 366, is a community birthday party to celebrate Black infants first birthday. The event organizers, which includes academic and community stakeholders, share their learnings from a qualitative analysis of a panel discussion about maternal and infant mortality.

This Special Issue seeks to shed light on birth experiences of communities most impacted by structural discrimination and marginalized health care. While highlighting the abysmal U.S. infant and maternal deaths, it is very important to offer solutions that researchers and practitioners alike can continue to lead the charge in improving birth-related outcomes.

## **REFERENCES**

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