

## Safe or Unsafe Motherhood The Invisibility of Foreign-born Black Mothers in Philadelphia\*

**JOAN ROSEN BLOCH, PH.D., CRNP**  
 ASSOCIATE PROFESSOR, DREXEL UNIVERSITY  
 PHILADELPHIA, PA  
**CECILY KNAUER, PH.D.**  
 MEDICAL ANTHROPOLOGIST  
 PHILADELPHIA, PA  
**MICHELLE KENSEY, MSN, RNC**  
 ASSISTANT PROFESSOR, DREXEL UNIVERSITY  
 PHILADELPHIA, PA  
**JANE GREENE RYAN, PH.D., CNM**  
 ASSISTANT PROFESSOR, DREXEL UNIVERSITY  
 PHILADELPHIA, PA  
**ANGELA GUERRIERO MA, MT-BC**  
 CLINICAL DIRECTOR OF TEMPO  
 NOTLEY, NJ  
**MARJIE MOGUL, PH.D.**  
 RESEARCH DIRECTOR, MATERNITY CARE COALITION  
 PHILADELPHIA, PA

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### “No relationships to disclose” Personal Ethical Discomfort Disclosure (November 2014)

- Conceptualization of Research during 2006-2008
- Different political –cultural –economic context
  - 2010 HP Goal: Eliminate racial/ethnic health disparities
  - Values of cultural engagement, cultural sensitivity, cultural congruent health care
- Slippery slope due to current political-cultural-economic context
  - After economic Down turn---today?
    - Vicious Immigrant debates---Fear mongering – Ebola--urban poverty worsens

### Background

- Globalization has changed patterns of migration with rapid feminization of the global labor force.
  - Caregivers of aged [20% Nursing Assistants (Massey, 2014)]  
Housekeepers, nannies, restaurant workers, sex trade?
- Invisibilities among documented and undocumented foreign-born pregnant women exist in the U.S.A.
- Of particular concern are pregnant black migrants who may be at more risk for preterm birth (PTB) compared to all other migrant groups.

### This is practice-based, translational research Are the Babies of Foreign-born Pregnant Women at more or less risk for Preterm Birth?

Service Areas of Existing Public Health Center Locations

### Theoretical Framework

Culhane's model of chronic maternal stress as a contributing factor to increased rates of PTB within socioeconomically disadvantaged populations and

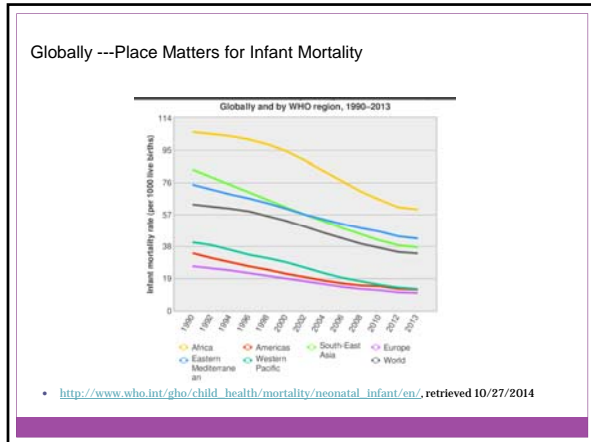
Meleis' transitions theory for understanding vulnerabilities and health care needs of immigrant, childbearing women

### Where you live matters Social determinants adversely affect health across the life-course

**Stressed Environments**

**Adverse Health Outcomes**

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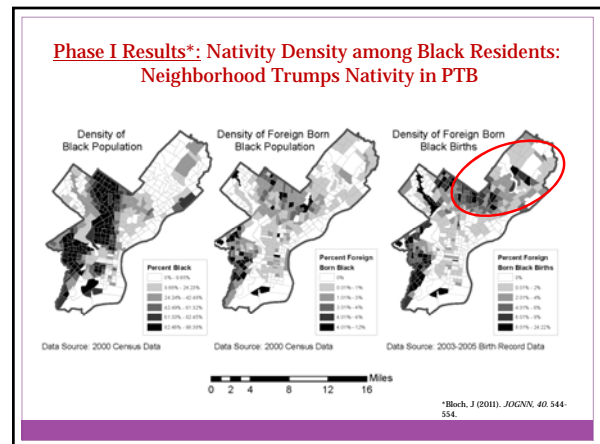
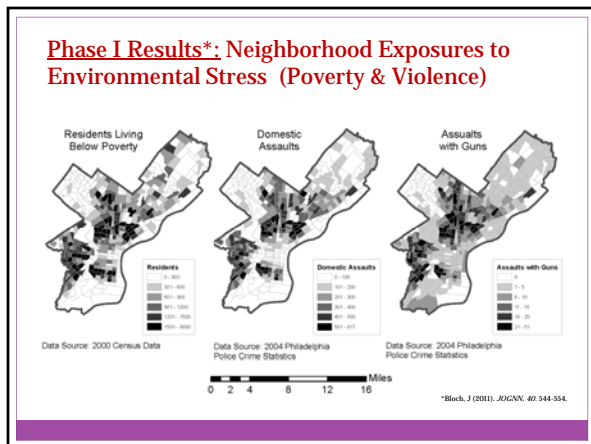
**This Study: Qualitative GIS Mixed- Methods\***

- Sequential mixed- methods
  - Phase I: Quantitative = Geographical Information Systems (GIS)
    - Is there a large population of foreign-born Black mothers having babies in Philadelphia?
    - Are there geographic patterns where they live (e.g., ethnic enclaves?)
    - Are there patterns with 'good' and 'bad' neighborhoods and PTB rates for the foreign-born and US-born black mothers?

\*Cope, M (2009). Qualitative GIS.

**Results of Phase I**

- 2003-2005 Live births in Philadelphia
- 61,416 total births
- 49% were to Black mothers (n=30,301)
  - 20.3% were to 'foreign-born' Black mothers (n= 6,136)
- 10 % of all births in Philadelphia were to 'foreign-born' Black mothers



Phase II: Qualitative = 'Ground Truthing'  
GIS results

What do the maps tell us?

- WHAT DO WE NEED TO KNOW ABOUT THE FOREIGN-BORN BLACK MOTHERS TO PROMOTE OPTIMAL MATERNAL-INFANT HEALTH?
- INTERDISCIPLINARY BI-WEEKLY MEETINGS (6 MONTHS)  
NURSES, PHYSICIAN, SOCIAL WORKER, PEDIATRIC THERAPIST, AND URBAN MEDICAL ANTHROPOLOGIST

**Phase II**

What do we need to know when we take care of foreign-born Black mothers and their infants?

- Key focus on the "Uninsurable or Undocumented"
- Task for each member (n=7)\*:

Questions	1-2 sentences explaining its importance

Migration *and* Childbearing Transitions

\*Team included clinical experts and researchers

Results (Content Analysis): (1) Migration Factors, (2) Access to Care, & (3) Cultural Awareness

What knowledge is needed to facilitate optimal adaptation to Migration *and* Childbearing Transitions for the "Uninsurable or Undocumented"

**Migration Factors and Health**

- How does the Country of Birth Shape Birth Outcomes in US
- Pre- and Post Migration conditions
- Specific Protective and Risk Factors of Health
- Acculturation to US

Results (Content Analysis): (1) Migration Factors, (2) Access to Care, & (3) Cultural Awareness

What knowledge is needed to facilitate optimal adaptation to Migration *and* Childbearing Transitions for the "Uninsurable or Undocumented"

**Access to Maternal Health Care in US**

- Navigating the US Health Care System for Migrants
- Does 'Invisibility' preclude access to safety net services
- What Health Care Models Optimize Maternal and Infant Health for Migrants?

Results (Content Analysis): (1) Migration Factors, (2) Access to Care, & (3) Cultural Awareness



What knowledge is needed to facilitate optimal adaptation to Migration *and* Childbearing Transitions for the "Uninsurable or Undocumented"

**Cultural Awareness & Sensitivity**

- Culturally informed histories guide interactions and instruct personal health practices
- Cultural beliefs and practices : childbearing, infant care, parenting
- Perceived barriers to health care use? (e.g. Sickle cell disease)


**Phase II: Extensive Literature Search**

- Key Results: Foreign-born Black mothers are essentially invisible in the clinical research conducted in the United States (US)—**WHY?**
  - Country of Birth not routinely asked
  - Not part of Medical Record
  - Immigrant and Migrant status invisible in medical records
  - "Country of Birth" added to 2003 US birth Records
  - Citizenship status – sensitive and unknown
    - "Don't ask, don't tell"

- **Limitations of Research**
  - GIS- Birth Record misclassification bias
    - ✦ Country of birth
    - ✦ Citizenship status & tenure in US unknown
  - Crude findings: just cartography
  - Limitations of qualitative methods
- **Future Health Promotion Research**
  - Safe Motherhood for undocumented migrants in USA?
    - We really know very little
      - Many different groups
    - 2014- Ethical conflict: help or harm

**In conclusion ...Look at the Bigger Picture**  
Maternal Health of our nation *is not* looking Good



**Heartbreaking**

Interested in Collaborating???

Joan Rosen Bloch, PhD, CRNP  
jrb68@drexel.edu

[http://www.who.int/gho/maternal\\_health/countries/en/#1](http://www.who.int/gho/maternal_health/countries/en/#1) retrieved 10-27-14  
Pooled adjusted MMR maternal deaths per 100,000 live births

**In conclusion: Need to Focus on Mothers**  
Healthy Mothers Have Healthy Babies



Healthy Babies

↓

Healthy Adults

↓

Healthy Communities