

**RESOLUTION TO RECOGNIZE APRIL 11 – 17, 2024 AS NATIONAL BLACK MATERNAL  
HEALTH WEEK**

**BY COUNCIL MEMBER GABRIELA SANTIAGO-ROMERO**

- WHEREAS,** Recognizing the seventh annual National Black Maternal Health Week to bring attention to the maternal health crisis in the United States and the importance of reducing maternal mortality and morbidity among Black women and birthing persons; and
- WHEREAS,** The U.S. has the highest maternal mortality rate among affluent countries, in part because of the disproportionate mortality rate of Black women that spans across all income levels, education levels, and socioeconomic status; and
- WHEREAS,** Structural racism, gender oppression, and the social determinants of health inequities experienced by Black women and birthing persons in the United States significantly contribute to the disproportionately high rates of maternal mortality and morbidity among Black women and birthing persons;
- WHEREAS,** The rate of preterm birth among Black women is nearly 50 percent higher than the preterm birth rate among White or Hispanic women;
- WHEREAS,** According to the Centers for Disease Control and Prevention, Black women in the United States are 2.6 times more likely than white women to die from pregnancy-related causes; and Black women in the United States suffer from life-threatening pregnancy complications, known as “maternal morbidities”, twice as often as white women, and are 49 percent more likely than all other women to deliver prematurely; and
- WHEREAS,** Racism and discrimination play a consequential role in maternal health care experiences and outcomes of Black birthing persons;
- WHEREAS,** Black midwives, doulas, perinatal health workers, and community-based organizations provide holistic maternal care but face structural and legal barriers to licensure, reimbursement, and provisions of care;
- WHEREAS,** A fair and wide distribution of resources and birth options, especially with regard to reproductive health care services and maternal health programming, is critical to closing the racial gap in maternal health outcomes;
- WHEREAS,** Even as there is growing concern about improving the access to mental health services, Black women are least likely to have access to mental health screenings, treatment, and support before, during and after pregnancy;
- WHEREAS,** Black pregnant and postpartum workers are disproportionately denied reasonable accommodations in the workplace, leading to adverse pregnancy outcomes;
- WHEREAS,** Black pregnant women disproportionately experience surveillance and punishment, including shackling incarcerated people in labor, drug testing mothers and infants

without informed consent, separating mothers from their newborns, and criminalizing pregnancy outcomes;

**WHEREAS,** Justice-informed, culturally congruent models of care are beneficial to Black women; and **NOW, THEREFORE, IT BE**

**RESOLVED,** That the Detroit City Council recognizes that Black women are experiencing high, disproportionate rates of maternal mortality and morbidity in the United States as unacceptable, and in order to better mitigate the effects of systemic and structural racism, all levels of government must work toward ensuring that the Black community has –

1. Safe and affordable housing;
2. Transportation equity;
3. Nutritious food;
4. Clean air and water, and environments free from toxins;
5. Decriminalization, the removal of civil penalties, ending surveillance, and enforcing mandatory reporting within the criminal justice and family regulation systems;
6. Safety and freedom from violence;
7. A living wage and equal economic opportunity;
8. A sustained and expansive workforce pipeline for diverse perinatal professionals; and
9. Comprehensive, high-quality, holistic, and affordable health care with access to the full spectrum of reproductive care, including maternal health and the full postpartum period up to at least 1 year after giving birth free of discrimination and regardless of incarceration;

**RESOLVED,** That the Detroit City Council fully supports and encourages policies grounded in the human rights, reproductive justice, and birth justice frameworks that address black maternal health inequity, and that Black women and birthing person must be active participants in the policy decisions that impact their lives;

**RESOLVED,** That the Detroit City Council recognizes April 11 – 17, 2024 as “National Black Maternal Health Week” and as an opportunity to:

1. Deepen the national conversation about Black maternal health in the United States;
2. Amplify community-driven policy, research, and care solutions;
3. Center the voices of Black mothers, women, families, and stakeholders;
4. Provide a national platform for Black-led entities and efforts on maternal health, birth, and reproductive justice; and
5. Enhance community organizing on Black maternal health.