

WHAT YOU DON'T KNOW HURTS US:  
UNDERSTANDING HOW RACISM AND WHITE  
PRIVILEGE AFFECT BREASTFEEDING DISPARITIES

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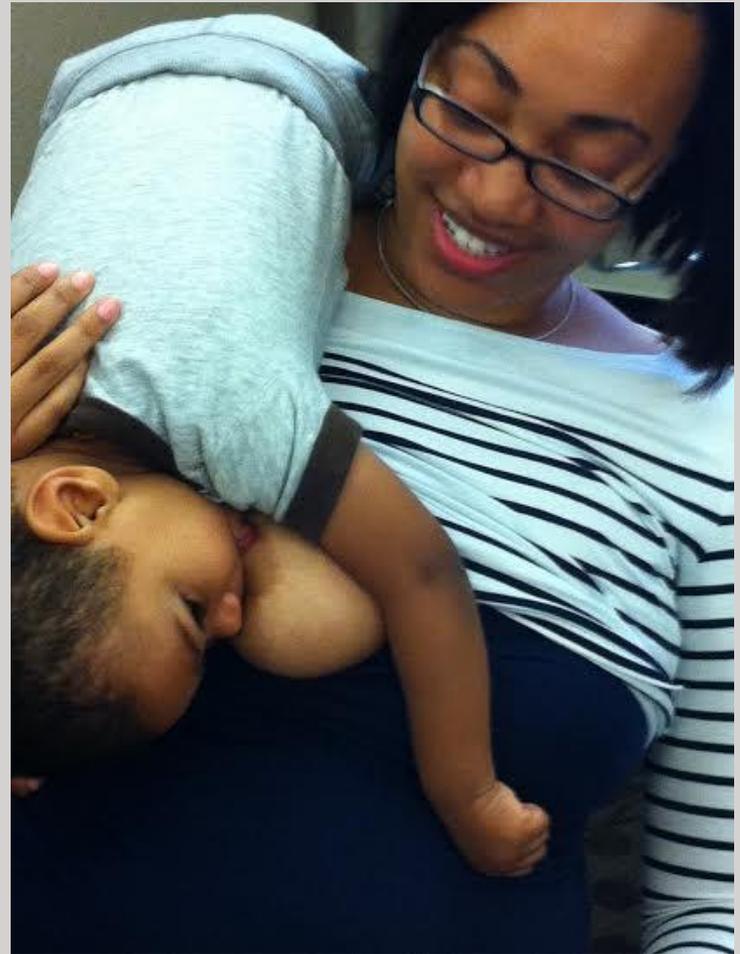
# Breastfeeding Disparities

What are  
breastfeeding  
disparity?



# Definitions

- *Disparity: a great difference*
- *Inequity: a lack of fairness or justice*



# MPINC DATA 2014 (Breastfeeding Report Card)

	<b>Ever Breastfed</b>	<b>Breastfeeding at 6 months</b>	<b>Breastfeeding at 12 months</b>	<b>Exclusive at 3 months</b>	<b>Exclusive at 6 months</b>
California	92.8	63.1	38.4	56.1	25.4
Missouri	67.9	42.1	20.2	32.5	14.1

<http://www.cdc.gov/breastfeeding/pdf/2014breastfeedingreportcard.pdf>

# Healthy People 20/20

Increase the proportion of infants who are breastfed:

- MICH-21.1: Ever 81.9%
- MICH-21.2: At 6 months 60.6%
- MICH-21.3: At 1 year 34.1%
- MICH-21.4: Exclusively through 3 months 46.2%
- MICH-21.5: Exclusively through 6 months 25.5%

# Breastfeeding Inequities

## According to the CDC:

- •The gap between black and white breastfeeding initiation rates narrowed from 24 percentage points in 2000 to 16 percentage points in 2008. The 6-month duration gap also narrowed from 21 percentage points to 17 percentage points during that same time.
- •Black infants consistently had the lowest rates of breastfeeding initiation and duration across all study years. Black mothers may need more, targeted support to start and continue breastfeeding.

<http://www.cdc.gov/breastfeeding/resources/breastfeeding-trends.htm>

# Racial Differences

Percentage of infants breastfed, by breastfeeding duration and race/ethnicity\* — National Immunization Survey, United States, 2008 births†

	Ever Breastfed	Breastfed at 6 months	Breastfed at 12 months
Black	58.9	30.1	12.5
White	75.2	46.6	24.3
Latina	80.0	45.2	26.3

# What Factors Create Inequity?

Breastfeeding  
inequity in the  
African-  
American  
Community



# Birth Facility Support

## Key Indicators:

- Percent of hospitals and birth centers where at least 90% of mothers and newborn infants have skin-to-skin contact for at least 30 minutes within one hour of an uncomplicated vaginal birth
- Percent of hospitals and birth centers where at least 90% of healthy full-term infants are rooming in with mother for at least 23 hours per day
- Percent of live births occurring at hospitals or birth centers designated as Baby-Friendly
- Percentage of breastfed infants receiving formula before 2 days of age

# Mother to Mother Support

## Key Indicators

- Number of La Leche League Leaders per 1,000 live births
- (Number of mother to mother support groups that are culturally specific to African-American mothers)

# Professional Support

- Number of International Board Certified Lactation Consultants (IBCLCs) per 1,000 live births
- (Access to any breastfeeding support credential is lacking by African-American women)

# IBLCE

- According to the IBLCE website, there are 26,660 IBCLCs in 96 countries around the world
- 13,848 are in the United States (roughly half)
- Racial categories are not currently tracked by IBLCE
- Most IBCLCs are Caucasian, registered nurses or registered dietitians, female, and tend to be older

# Support in Childcare Settings

- States child care regulation support onsite breastfeeding
- (Access to childcare that supports breastfeeding)

# Unnatural Causes

“When the bough breaks” How Racism Impacts Pregnancy Outcomes

UCLA obstetrician and gynecologist Dr. Michael Lu believes that for many women of color, racism over a life time, not just during the nine months of pregnancy, increases the risk of preterm delivery. To improve birth outcomes, Lu argues, we must address the conditions that impact women's health not just when they become pregnant but from childhood, adolescence and into adulthood.

[http://www.unnaturalcauses.org/video\\_clips\\_detail.php?res\\_id=70](http://www.unnaturalcauses.org/video_clips_detail.php?res_id=70)



# Weathering Hypothesis

- One of the most prominent theories for explaining the persistent disparity is the weathering hypothesis, which suggests that stress over the course of Black women's lives prematurely ages their reproductive systems, putting them at higher risk for adverse birth outcomes over the course of their child-bearing years. Significantly, the racial disparities observed in health outcomes are NOT due to inherent physiological differences between Black and White women.

(Dominquez, 2010)

# What is the role of systemic racism and white privilege?

RACISM

WHITE  
PRIVILEGE



# What role does systemic racism play in disparities?

- Structural Racism- inequities that are built into the key structures of society: educational, legal, employment, housing, and healthcare
- Structural Discrimination- the expression of that racism through discriminatory acts in the lives of selected population

# White Privilege



White privilege (or white skin privilege) is a set of societal privileges, existing in predominantly white societies, which benefit white people beyond what is commonly experienced by non-white people in the same social, political, or economic circumstances.

# What is culturally congruent care?

## Cultural awareness

- It is an in-depth self-examination of one's own background, recognizing biases and prejudices and assumptions about other people.

## Culturally congruent care

- Care that fits the people's valued life patterns and set of meanings -which is generated from the people themselves, rather than based on predetermined criteria.

## Culturally competent care

- is the ability of the practitioner to bridge cultural gaps in caring, work with cultural differences and enable clients and families to achieve meaningful and supportive caring.
- [http://currentnursing.com/nursing\\_theory/transcultural\\_nursing.html](http://currentnursing.com/nursing_theory/transcultural_nursing.html)

# Cultural Humility

Cultural humility incorporates a lifelong commitment to self-evaluation and critique, to redressing the power imbalances in the provider-patient dynamic, and to developing mutually beneficial and non-paternalistic partnerships with communities on behalf of individuals and defined populations.

-Melanie Tervalon and Jane Murray-Garcia

# Microinvalidations

- Communications that subtly exclude negate or nullify the thoughts, feelings or experiential reality of a person of color. Example: Telling a woman of color, she is welcome to attend a community support group that takes no account of her cultural beliefs about parenting or breastfeeding.

Derald Wing Sue. Racial Microaggressions in Everyday Life: Race, Gender and Sexual Orientation (John Wiley & Sons, 2010)

# Microinsults

- Verbal, nonverbal, and environmental communications that subtly convey rudeness and insensitivity that demean a person's racial heritage or identity. Example: Making an assumption that an African-American women will not want to breastfeed her baby.

Derald Wing Sue. *Racial Microaggressions in Everyday Life: Race, Gender and Sexual Orientation* (John Wiley & Sons, 2010)

# Microassaults

- Conscious and intentional discriminatory actions: Example: Grabbing a mother's breast without asking permission, making negative comments about her physiology.

Derald Wing Sue. *Racial Microaggressions in Everyday Life: Race, Gender and Sexual Orientation* (John Wiley & Sons, 2010)

# Other Microaggressions

- **Marginalization**- relegated to the fringes (included, but last minute, and off to the side)
- **Invisibility**- not noticed enough to be included (not noticing who is NOT in the room when decisions are being made- especially if decisions impact communities of color)
- **Trivialization**- issues are dismissed (telling women of color not to be so overly 'sensitive' when she expresses discomfort at being the only woman of color in the room)

# Disparities Pimping

- Using the data of communities or populations that demonstrate great disparities, to gain funding or other assets then using those funds or assets to benefit anyone other than the community whose data was used.
- Running programs to end disparities that remain ineffective in changing outcomes
- Talking the talk of ending disparities but not walking the walk

# Uzazi Village

Kansas City  
MO



# Uzazi Village



## Mission

*To increase maternal and infant health equity in the urban core*

## Vision

*For every family, a healthy baby;  
For every baby, a healthy village*

# Organizational Focus

## Goals

Increase breastfeeding rates among low income African-American women

## Targets

Breastfeeding parents, support groups, professionals and birth facilities

## Strategies

Community education, professional education, cultural specific support

# Uzazi Village Programs

- Doulas for Medicaid Patients
  - Sister Doula Demonstration Project
  - All Sister Doulas are breastfeeding peer counselors
- Chocolate Milk Café Support Group
- Babywearing Basics Class
- Breastfeeding Basics Class
- Lactation Consultant Mentorship Program
- IBCLC Scholarship for Candidates of Color

# Chocolate Milk Café



- African and African-American specific
- Facilitator Certification
- A ‘Sacred Space’
- A Perinatal Safe Space

# What is cultural congruence?

- Culturally specific breastfeeding support

<http://kcur.org/post/kc-group-fights-breast-feeding-disparities-education-support>

# Why Culture Specific?

- Non-affinity with dominant normative culture models
- Distrust of the current healthcare system
- Impact of systemic racism and white privilege
- Adoption of Afrocentric attitudes, practices, beliefs
- Correlation with openness to new ideas about health and parenting behaviors (this also occurs with pregnancy)
- Seeking safe spaces where they are welcome and understood
- Appreciation for 'Black Esthetic'
- Speak the 'same language'

# How Can I Learn More?

## RESOURCES



# Ready, Set, Listen- Cynthia Good Mojab

## Inequity

in the field of breastfeeding  
support cannot be eliminated without

**looking inward**

-as individuals and institutions-  
to understand the

**privilege**

we hold at the expense of  
those who are disproportionately

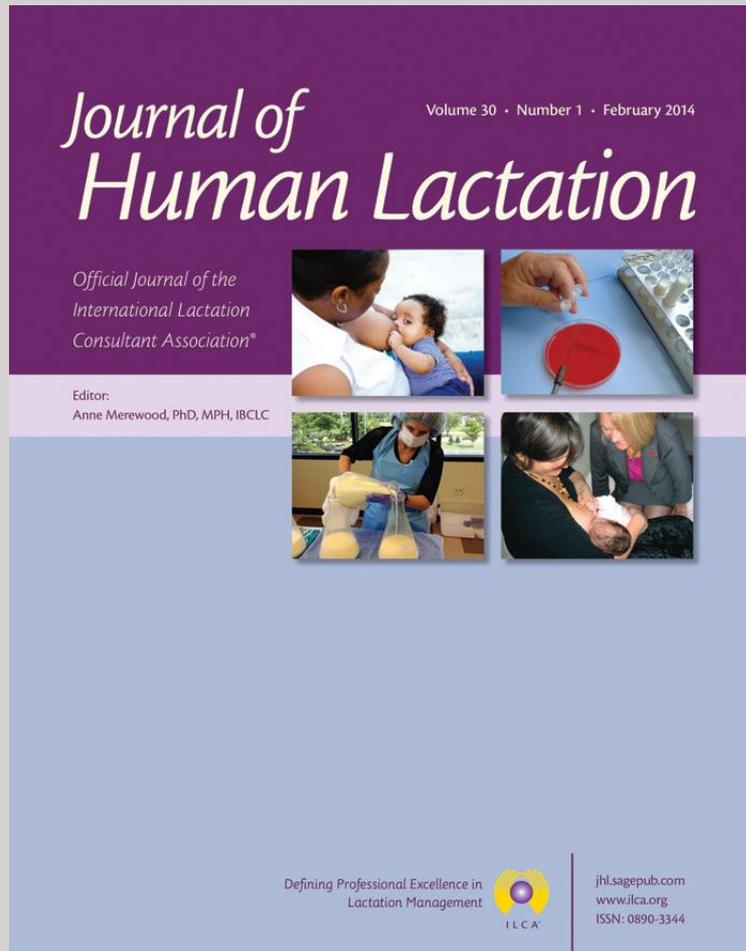
**excluded.**

Cynthia Good Mojab, MS, LMHCA, IBCLC

*Learn More at*



# Journal of Human Lactation



January/February 2015 issue  
is on **Breastfeeding Equity**

- Pandora's Box Is Already Open: Answering the Ongoing Call to Dismantle Institutional Oppression in the Field of Breastfeeding
- Creating a Culture of Breastfeeding to Reduce Disparities
- Lessons Learned from African American Women who Breastfeed

# Recommendations

- Utilize anti-racism training to build awareness of systemic racism and white privilege
- Engage the conversation on racism and white privilege
- Find out what and where the barriers are
- Focus on gaps in services
- Build strategic partnerships to create needs-specific programs
- Advocate for culturally congruent care and support models
- Listen with an unbiased ear and an open heart, learn to be a good ally

[www.uzazivillage.com](http://www.uzazivillage.com)



# Contact

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