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

Breastfeeding Disparities

What are breastfeeding disparity?



Center for Social Inclusion

- Policies drive how these institutions and structures intersect to create economic and social opportunities, even on a local level, in communities. People of color have historically lived, and tend to still live, in the most under-resourced neighborhoods. This is called structural racial inequity. Structural racial inequity is the way our policies and institutions interact, often invisibly, to produce barriers to opportunity, leading to systemic racial disparities. While interpersonal racial discrimination is often intentional with structural racial inequity, intent to discriminate is not required.
- Structural racial inequity is more often a cumulative result of how multiple institutions and policies intersect, rather than the result of an individual or organization's action. And because of historic and present day policy decisions, people of color are, more often than not, positioned poorly in terms of institutions and policies, resulting in the deep racial disparities we see in every aspect of our society today.

http://www.centerforsocialinclusion.org/wp-content/uploads/2015/10/CSI-Removing-Barriers-to-Breastfeeding-REPORT.pdf



From the Centers for Disease Control

According to the CDC:

African- American women are much less likely than any other ethnic group to breastfeed their babies, and that this lack of exposure to their mother's milk allows for increased risk of morbidity and mortality.

http://www.cdc.gov/nchs/data/databriefs/db74.htm#summary

Breastfeeding Inequities

- 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

Breastfeeding and Systemic Discrimination

"First, available research on breastfeeding interventions fails to consider the influence of racism across all system levels of the social ecological spectrum, although systemic discrimination is well documented and undermines African-American women's chances for optimal health. This represents a common oversight because most breastfeeding researchers do not address discrimination and are also criticized for failing to address manifestations of racism that may impact breastfeeding disparities..."

Johnson Angela, Kirk Rosalind, Rosenblum Katherine Lisa, and Muzik Maria. Enhancing Breastfeeding Rates Among African American Women: A Systematic Review of Current Psychosocial Interventions Breastfeeding Medicine. January/February 2015, 10(1): 45-62. doi:10.1089/bfm.2014.0023.

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

http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6205a1.htm

What Factors Create Inequity?

Breastfeeding inequity in the African-American Community



IBLCE and the IBCLC Credential

- 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

National Survey of Insurance Reimbursement

	IBCLC %	Population %
White, non Hispanic	87.1	63.4
Black, non Hispanic	1.6	12.3
Hispanic	4.7	14.7
Asian	1.4	5.0
Native American	0.8	5.0

Chetwynd, E., Meyer, A., Stuebe, A., Costello, R., Labbock, M. (2013). Recognition of International Board Certified Lactation Consultants by health insurance providers in the United States; results of a national survey of lactation consultants. *Journal of Human Lactation*. 29(4); 517-526.

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



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 PRIVILEDGE



What role does systemic racism play in disparities?

 Structural Racisminequities 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.

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 nonpaternalistic 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: Providing print matter that only shows dominant culture women 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 Microagressions

- 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

Have you ever heard these statements?

- I'm colorblind, I don't see race.
- What about reverse racism?
- Don't blame me, I wasn't alive when all those bad things happened.
- I can't be racist, my best friend is African-American.
- We don't have those problems here.
- □ This isn't really a race issue, it's a class issue.
- Teach me what I need to know.
- I treat everyone the same.

A Better Approach

Each cultural groups has unique strengths and perspectives that the larger community can benefit from.

We need a wide range of ideas, customs, and wisdom to solve problems and enrich community life. Bringing non-mainstream groups into the center of civic activity can provide fresh perspectives and shed new light on tough

Cultural Acceptance

Understanding cultures will help us overcome and prevent racial and ethnic divisions.

Racial and ethnic divisions result in misunderstandings, loss of opportunities, and sometimes violence. Racial and ethnic conflicts drain communities of financial and human resources; they distract cultural groups from resolving the key issues they have in common.

Cultural Inclusion

People from different cultures have to be included in decision-making processes in order for programs or policies to be effective.

The people affected by a decision have to be involved in formulating solutions--it's a basic democratic principle. Without the input and support of all the groups involved, decision-making, implementation, and follow through are much less likely to occur.

Social Equity

An appreciation of cultural diversity goes handin-hand with a just and equitable society.

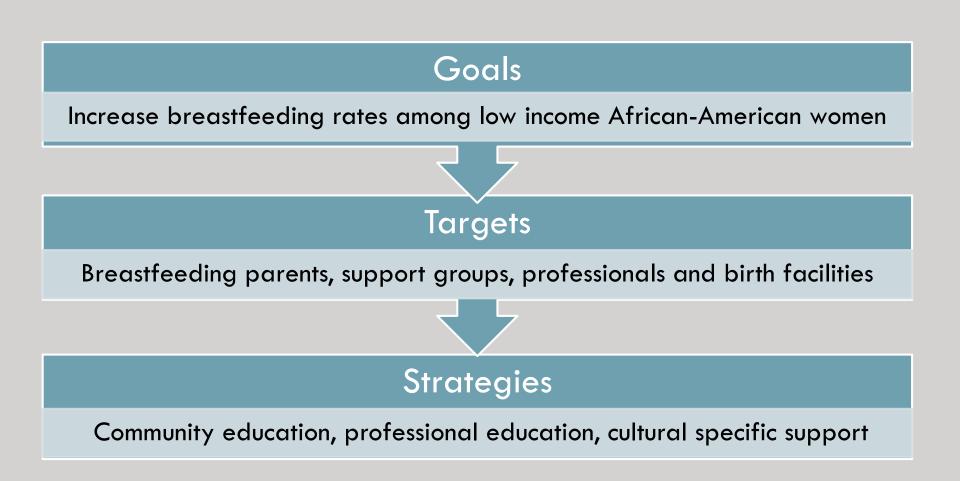
For example, research has shown that when students' cultures are understood and appreciated by teachers, the students do better in school. Students feel more accepted, they feel part of the school community, they work harder to achieve, and they are more successful in school.

Uzazi Village

Kansas City Missouri



Organizational Focus



Uzazi Village Programs

- Perinatal Community Health Workers
- Chocolate Milk Café Support Group
- Babywearing Basics Class
- Free Walk-In Breastfeeding Clinic
- Lactation Consultant Mentorship Program
- IBCLC Scholarship for Candidates of Color



National Public Radio



http://kcur.org/post/k
c-group-fights-breastfeeding-disparitieseducationsupport#stream/0

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 have a 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
- Seeking appreciation for 'Black Esthetic'
- Speak the 'same language'

Discussion Question



Consider ways in which systemic racism plays a role in breastfeeding disparities in your organization, or agency. How can you begin to create greater awareness around this issue?



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