

Stress, Racism May Endanger Black Infants

SHERRI ACKERMAN

The Tampa Tribune

Published: September 28, 2008

TAMPA - When Gaye Lamar had her second miscarriage three months ago, she didn't think about all the reasons why.

The 27-year-old mother of three girls has struggled with high blood pressure and diabetes and was diagnosed with preeclampsia, a condition characterized by hypertension and swelling of the hands and feet, during the birth of her second child.

But other factors may have contributed to her recent loss: chronic stress and racism.

In Hillsborough County, Lamar, a black, married high school graduate, is twice as likely as a white woman to have a baby die in its first year of life. Even if Lamar had a college degree, research shows her chances would still be greater than that of a white mother who was a high school dropout.

The questions of why that is and what can be done about it have frustrated doctors and researchers in recent years. Not only are black women much more likely to have a baby die within its first year, they're more likely, like Lamar, to have unsuccessful pregnancies.

Study Asks 'What Is Different?'

New research is beginning to point toward a complicated answer that takes into account life and societal factors such as education and racism as well as genetic contributors.

"You have to look at this in the context of being black in America," said Leisa Stanley, associate director of Healthy Start Coalition of Hillsborough County, which is a partner in a state-funded study titled Black Infant Health Practice Initiative. "What is different?"

Florida health statistics show that in 2005, the mortality rate for black infants was 4.4 times higher than that of white infants. That number decreased slightly in 2006, but rose in 2007, Stanley said.

It's too soon to know why the rates have fluctuated, she said. Such determinations usually take about three years.

Although Lamar didn't give birth in June, the loss of her fetus offers clues into how her life history and that of other black women affects not only her health, but the health of future generations.

The issues of poor education, poverty and substance abuse touch all racial groups, and the biggest disparity seems to be the quality of maternal health care for black women.

Pregnant women whose prenatal care is covered by Medicaid lose that insurance after their baby is born. For black moms like Lamar, who are at greater risk for high blood pressure and diabetes, their symptoms often go unchecked and untreated until they qualify for other insurance or get pregnant again.

At a town hall meeting last week, researchers presented findings from a survey on black infant mortality conducted in April. Focus groups made up of 97 women and men 18 and older who live in the predominately black neighborhoods of East Tampa were asked what factors they thought contributed to so many infant deaths in their community.

Some of their observations about black women included a lack of transportation and support within the community - from families and other women as well as from social service networks.

Respondents noted that black women often are heads of households and sole wage-earners raising their children's children, nieces and nephews. Some might live in dangerous neighborhoods.

"They're stressed out," said Terri Ashmeade, director of Tampa General Hospital's neonatal intensive care unit. "This is what is impacting our community. And I'm not afraid to bring up racism."

Much More To Learn

The stressors include things such as a nurse assuming you are covered by Medicaid because you are black or a doctor refusing service because you're on public assistance.

The constant battle is wearing them out, residents said. What was surprising, though, was who was doing the discriminating, researchers said.

Some of the participants reported being treated poorly at their doctors' offices by front-desk staff - many of whom were also black.

"So it's unclear if it's racial or social," said Deborah Austin, a co-investigator and program manager at the Lawton and Rhea Chiles Center for Healthy Mothers and Babies.

Better training for medical professionals could help, but there is much more to learn about how racism affects black women, she said.

Austin offered this example from California researchers who have looked at the rate of black babies dying in other parts of the world. Researchers found that African women who come to the United States and have babies experience the same low rate of infant deaths as white American mothers. But that rate declines rapidly with each generation of American women who descend from that African woman.

"We know it's something about living in this environment," Austin said, but it's not just looking at what happens to a woman before she gets pregnant. "We really have to make sure she is healthy as a little girl, a teen and an adult."

Reporter Sherri Ackerman can be reached at (813) 259-7144 or sackerman@tampatrib.com