

BARRIER TO CHANGE:

→ **Hospital performance data lacks disaggregation and structural measures**

This document describes actions from the [Birth Equity Action Map](#) that can influence hospital performance data that traditionally lacks disaggregation and structural measures, which was identified as a barrier to change using the [Iceberg Model of Systems Thinking](#). Click [here](#) to view these actions in the interactive Birth Equity Action Map.



ACTION



DESCRIPTION



RESPONSIBLE SYSTEM ACTORS

ACTION	DESCRIPTION	RESPONSIBLE SYSTEM ACTORS
<p>Assess organization's current conditions and activities⁴</p>	<p>Assess organization's current conditions and activities informed by data. Results of the assessment should identify gaps and be actionable. Specifically, this can include:</p> <ul style="list-style-type: none"> • Latest maternal and infant health access, outcomes, quality, and experience data, stratified by self-identified race, ethnicity, limited English proficiency, disability, sexual orientation and gender identity, and type of coverage, with historical trends if available. • Inventory and assessment of clinical maternity and reproductive healthcare services (preconception, pregnancy, childbirth, and postpartum practices) through the lens of whole person care. • Inventory & assessment of the intercultural competence of leaders/organizations. • Inventory and assessment of the capacity to support the mental health and social needs of diverse childbearing women and people. • Assessment of the current capability to effectively and respectfully serve specific groups of people who wish to become pregnant, are currently pregnant, or recently gave birth. These groups include: People from communities experiencing historical and ongoing racism. Immigrants, including those without legal status. People with limited English proficiency. People with disabilities. People with varied sexual orientations and transgender and gender-nonconforming people. • Survey of current and potential birthing people about their expectations for and recommended improvements of maternity-related services, co-designed with service users. • Hospital assessment of facility readiness to support breastfeeding using CDC's mPINC 10 Steps Assessment Tool 	<p>State and local health agencies, Community-based organizations, Health systems, Hospitals</p>
<p>Promote disaggregated data collection and sharing^{3,4}</p>	<p>Enhance and financially support comprehensive, disaggregated data collection and transparent sharing from health systems in order to accurately understand and track inequities and allocate funding.</p>	<p>State and local health agencies, Health systems, Hospitals, Payers</p>



ACTION	DESCRIPTION	RESPONSIBLE SYSTEM ACTORS
<p>Reform hospital accountability benchmarks^{1,3,5}</p>	<p>Reform hospital accountability benchmarks to incentivize care delivery that is free from bias and medical error, based in equity, accounts for different provider types, and is patient-centered. This should also include incentivizing, measuring, and reporting on the frequency and quality of human milk feeding initiation and support in hospital obstetric units and scaling up measures like the Patient Reported Experience Measure of Obstetric Racism® (also called The PREM-OB Scale™ Suite) to increase hospital capacity for transformation.</p>	<p>National non-profits, Health systems, Payers</p>
<p>Strengthen facility and provider accountability for patient rights^{3,4}</p>	<p>Assess and strengthen health system and hospital policies and insurance policies to ensure facility and provider accountability to patient rights and birthing autonomy.</p> <p>This could include implementing a consistent, streamlined process for accessing financial assistance or charitable care, within and outside the provider institution, that is not punitive or predicated on the existence of medical debt.</p>	<p>Health systems, Hospitals, Payers, Legislators</p>

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Sources

Actions were synthesized from a two-part Systems Mapping to Advance Birth Equity workshop with 48 diverse actors representing federal, state, local, community, and family birth equity partners as well as the following recommended recent sources that have called for specific actions to advance birth equity.

1. Black Mamas Matter Alliance (2023). Black Mamas Matter: In Policy and Practice: A policy agenda for the Black maternal health, rights, and justice movement.
2. Institute for Medicaid Innovation (2023). Innovation in Perinatal and Child Health in Medicaid.
3. National Birth Equity Systems Mapping Workshop (2023). AMCHP Virtual Workshop, May and June 2023.
4. National Partnership for Women and Families (2023). Raising the Bar for Maternal Health Equity and Excellence.
5. New Jersey Health Care Quality Institute and The Burke Foundation (2022). Delivering Better Care: Midwifery Practice in New Jersey.

Participating Organizations (in the workshop or feedback sessions)

- Alliance for Early Success
- Birthing Cultural Rigor, LLC
- BirthMatters
- Black Mamas ATX
- CityMatCH
- Family Solutions: A Program of the SC Office of Rural Health
- Funders for Birth Justice and Equity
- Georgetown University Center for Children and Families
- Giving Austin Labor Support
- Greater Newark Health Care Coalition
- Hand to Hold
- Healthy Mothers, Healthy Babies Coalition of Georgia
- HRSA's Maternal and Child Health Bureau
- Institute for Women and Ethnic Studies
- Intermountain Health RMOMS Program
- Mama Sana Vibrant Woman
- Mamatoto Village
- March of Dimes
- Maternal Health Equity Collaborative
- Maternal Mental Health Leadership Alliance
- Merck for Mothers
- Minnesota Indian Women's Resource Center
- National Healthy Start Association
- National Institute of Children's Health Quality
- National Partnership for Women & Families
- Our Journ3i
- Philadelphia Department of Public Health
- Preeclampsia Foundation
- Rhode Island Department of Health
- Sedgwick County Health Department
- St. Joseph County Department of Health
- Starting Out Right
- The BEE Collective
- The Reilly Group
- Trenton Health Team
- The U.S. Department of Agriculture
- U.S. Department of Labor
- Utah Pacific Islander Health Coalition
- University of Washington's Parent-Child Assistance Program