

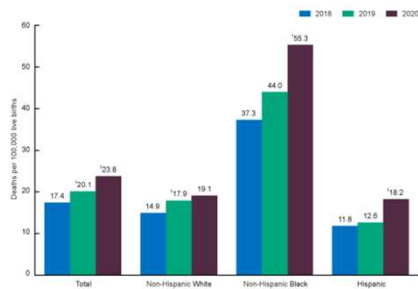
Suffering in Silence: Black Maternal Mortality and Epistemic Injustice

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Introduction

What is supposed to be a lovely and exciting time for new mothers, is inherently risky and life-threatening for Black mothers. In 2020, the CDC reported that the Black maternal mortality rate was 55.3 deaths per 100,000 live births.¹ This is more than twice the national average of the overall maternal mortality rate. While complex factors such as access to healthcare and socioeconomic status influence maternal health outcomes, the ways in which physicians interact with pregnant Black women needs to be addressed. I propose using the concept of epistemic injustice to examine interactions between physicians and expecting Black women. In *Epistemic Injustice: Power and Ethics of Knowing*, English philosopher Miranda Fricker examines the relationship between credibility and epistemic injustice. Black women are silenced, and their symptoms are overlooked because their testimonies are not given the credit that is due. In my research, I have found that testimonial and hermeneutical injustice towards pregnant Black women is perpetuated because of biological fallacies and implicit biases in pain treatment and patient-physician interactions. Exploring these connections to Black maternal health care allows us to shed light on the mistreatment of Black mothers. Work can be done to reduce Black maternal mortality rates in the US.

Figure 1. Maternal mortality rates, by race and Hispanic origin: United States, 2018–2020

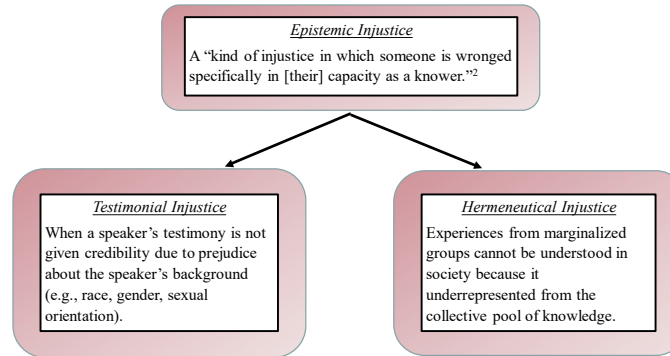


Source: National Center for Health Statistics, National Vital Statistics System, Mortality.¹

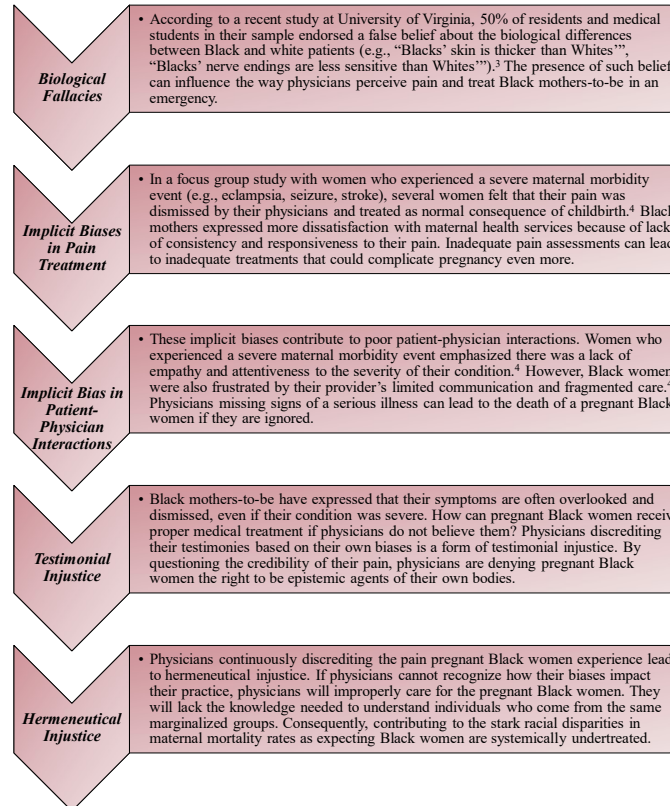
Methods

For my research, I searched for peer-reviewed health articles in PubMed. The articles included were found through the following search terms: ((false beliefs) AND (pain)) AND (racial disparities); (((Black women) AND (racial disparities)) AND (ethnic disparities)) AND (maternal mortality) AND (maternal morbidity); (((patient provider) AND (racial disparities)) AND (mortality)) AND (maternal). Then, I looked through articles that were published within the last 10 years, between 2012 to 2022. That way, the data and information pertaining to my research was current and relevant.

What is Epistemic Injustice?



Discussion



Conclusion

Physicians perpetuate epistemic injustice towards pregnant Black women by believing in biological fallacies and exhibiting implicit bias in pain treatment and patient-physician interactions. The mistreatment of expecting Black women leads to poor physical and mental health problems, which contributes to maternal mortality. Because of the lack of credibility given to Black mothers-to-be, they must advocate for themselves and their community. Not only to overcome physicians' personal biases, but to receive proper medical care and have the chance to be a mother. Work can be done to reduce Black maternal mortality rates in the US. Physicians can:

- Believe Black Women**
- Recognize Implicit Biases**
 - In a study conducted by the Society for Maternal Fetal Medicine, 83% of providers believed that disparities influenced their practice, but only 29% believed their care for patients was affected by their personal biases.⁵ Failing to acknowledge their own biases further intensifies the discrimination expecting Black women already face in the healthcare system.
- Create Educational Programs**
 - Through medical education, implicit biases can be taught and misinformation about the pain tolerance can be dispelled. Educational programs can help physicians reduce their biases, enhance their medical practice, and improve patients' health outcomes.
- More Quantitative Research**
 - This research heavily relied upon qualitative studies to learn about the experience Black mothers face in the healthcare system. However, more quantitative studies should be conducted to measure physicians' implicit biases. Then, see how much it impacts Black maternal mortality.

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