

Councilmember Ben Bartlett

City of Berkeley, District 2180 Milvia Street. 5th Floor Berkeley, CA 94704

PHONE: 510-981-7130

EMAIL: bbartlett@cityofberkeley.info

CONSENT CALENDAR July 23, 2019

To: Honorable Mayor and Members of the City Council

From: Councilmember Ben Bartlett and Cheryl Davila

Subject: Letter of Support for California Bill SB 464, the Dignity in

Pregnancy and Childbirth Act

RECOMMENDATION

That the Mayor and Berkeley City Councilmembers support the Senate Bill 464 (SB 464) otherwise known as the California Dignity in Pregnancy and Childbirth Act and write a letter of support to Senator Holly J. Mitchell. Senate Bill 464 would attempt to find data relating to implicit bias and racial disparities in maternal mortality rates and institute measures to ensure equal treatment of all pregnant patients.

CURRENT SITUATION

Although California's maternal mortality rate has decreased by 55% since 2006, black women still die in childbirth three to four times more than other races. This could be evidence of a disparity in the quality of perinatal care of pregnant patients of all races. SB 464, or the California Dignity in Pregnancy and Childbirth Act, will help reduce the effects of implicit bias in perinatal care so that all pregnant patients are treated equally and with dignity and respect.

A study released in June of 2019, looking at discrimination and treatment of perinatal patients found that 1 out of 3 Indigenous women, 1 out of 4 Latinx women and 1 out of 5 Black women experienced some typed of mistreatment during pregnancy, delivery or postpartum. This includes being yelled at, threatened to withhold or force treatment on someone, as well as violating physical privacy including hitting or striking. In recent studies, African American mothers reported disrespectful treatment by maternity caregivers. Among those identifying concerns, there were significant differences within subgroups showing clear advantages for White women, Englishspeaking women and women with private insurance relative to their counterparts. We also asked whether during the hospital stay for birth the women had experienced harsh

language and rough handling from personnel. With respect to the use of harsh language and to rough handling, women who were Black or primarily spoke an Asian language at home were more likely than White women or Latinx to report both types of ill-treatment. The disparity exists also as to pressure to experience several major interventions: labor induction, epidural analgesia in laboring women and cesarean birth. Women covered by Medi-Cal were more likely to identify concerns in all three areas than women with private insurance.¹

By writing a letter of support for SB 464, the City of Berkeley would uphold its commitment to equality for all people.

BACKGROUND

SB 464 would require any medical center that provides perinatal care to implement an evidence-based implicit bias program for all health care providers involved in such care. It also requires these medical centers to track and publish data on maternal death; and requires that certificates of death indicate whether the person was pregnant either within 42 days of death or within 43 to 365 days of death; and requires that patients be provided information regarding their rights "to be free of discrimination on the basis of race, color, religion, ancestry, national origin, disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, sexual orientation, citizenship, primary language, or immigration status." SB 464 would also require hospitals to provide information on how to submit any complaints regarding a violation of these rights.

It would also mandate implicit bias training of staff to ensure the provision of equal treatment to all pregnant patients at hospitals and health centers. This basic training would be required for providers and refresher courses would be taken every 2 years or earlier thereafter.

All of these measures are aimed to reduce preventable deaths, severe illnesses, and other health disparities associated with pregnancy.

REVIEW OF EXISTING PLANS, PROGRAMS, POLICIES, AND LAWS

Existing law requires the State Department of Public Health to maintain a program of maternal and child health that includes services intended to reduce infant mortality and

¹ The Giving Voice to Mothers study: inequity and mistreatment during pregnancy and childbirth in the United States *Reproductive Health*201916:77

² https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201920200SB464

improving the health of mothers and children. Existing law requires the department's Office of Health Equity to be a resource for "ensuring that programs collect and keep data and info regarding ethnic and racial health statistics, and strategies and programs that address multicultural health issues including infant and maternal mortality.

Existing law also requires that local registrars keep records of all births and deaths in the district in which the death was pronounced or body was found. It also sets forth the persons responsible for completing the certificate of death and requires certain medical and health content on the certificate, including whether the person was pregnant at time of death or the year prior to death.

Existing law also requires medical centers to provide information to each patient upon admission regarding their rights. One of these rights is the right to be informed of continuing health care requirements following discharge from the hospital. Violations of these requirements would be a crime.

ACTIONS/ALTERNATIVES CONSIDERED

No other alternative actions considered.

RATIONALE FOR RECOMMENDATION

Despite advances in medicine and perinatal care in the past decade, the rate of black deaths in childbirth are still three to four times higher than other races.³ In order to address this issue, SB 464 will specifically address the inequities of maternal care for black patients by requiring a number of measures aimed at reducing implicit bias and ensuring equal treatment for all pregnant patients before, during and after childbirth. The Mayor and City Council should support this senate bill to uphold its own commitment to equality regardless of race or ethnicity.

IMPLEMENTATION, ADMINISTRATION AND ENFORCEMENT

With the Mayor and City Council's approval, an official letter of support will be sent to Senator Holly J. Mitchell and co-authors of SB 464.

FISCAL IMPACTS OF RECOMMENDATION No fiscal impacts.

ENVIRONMENTAL SUSTAINABILITY

³ https://sd30.senate.ca.gov/support-sb-464

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No negative impact.

OUTCOMES AND EVALUATION

By showing that the public is in support of this Senate bill, there will be a greater chance that the bill will pass, providing equal treatment for all pregnant patients.

CONTACT PERSON

Councilmember Ben Bartlett 510-981-7130

Brian Gan brianjgan@berkeley.edu

ATTACHMENTS

1. Letter to Senator Holly J. Mitchell

Attachment 1: July xx, 2019

The Honorable Holly J. Mitchell United States Senate

Washington, D.C. 20510

Re: SB 464 (Mitchell)

Dear Senator Mitchell:

The Honorable Mayor and Members of the Berkeley City Council are pleased to support SB 464. SB 464 seeks to find evidence of implicit bias and racial disparities in perinatal care. To accomplish this, the bill will implement a number of measures.

First, the bill will require implicit bias training for staff at medical centers in an effort to eliminate any unequal treatment in maternal care. The bill also requires the tracking and publishing of data on births and maternal deaths in order to make the processes around these events more transparent. Lastly, the bill ensures that all patients admitted to hospitals and medical centers are provided with information regarding their right to be free of discrimination on any basis.

It is crucial that the Senate upholds and defends the rights, dignity, and respect of all of its citizens, especially those going through the vital act of bringing life into the world. For these reasons, we strongly support SB 464.

Respectfully,

The Honorable Mayor and Members of the Berkeley City Council

Jesse Arreguin Mayor, City of Berkeley

Members of the Berkeley City Council