

Dr. Joia Crear-Perry  
Testimony, U.S. Commission on Civil Rights  
Word Count: 706  
November 13, 2020

My name is Dr. Joia Crear-Perry. I am an OB-GYN by training and serve as the Founder and President of the National Birth Equity Collaborative, where we create solutions that optimize Black maternal and infant health through training, policy advocacy, research, and community-centered collaboration.

As the daughter of Black medical professionals from the Deep South—my dad is an ophthalmic surgeon and my mother is a pharmacist—from very early on I understood the value of caring for the health and lives of America’s most minoritized group—the descendants of Africans enslaved in the Americas.

While I grew up with those values, my medical education tried to teach me the opposite.

Not valuing the lives of Black and Indigenous people is driving the maternal health crisis in the United States, where they are two to three times more likely to experience maternal death than white women. We are the only industrialized nation where maternal health is on the decline. My daughter Jade is more likely to die in childbirth than when I had her over 27 years ago. And in wealthy cities like New York City the disparity is even greater; Black women are eight to twelve times more likely to die of a pregnancy-related cause than white women.

We know the root causes of poor maternal health—racism and gender oppression inside of healthcare systems and every other facet of society. Women of color are more likely to experience a comorbid illness and report being unfairly treated within healthcare settings based on their race or ethnicity. The inequities that Black women face have become even more urgent as the pandemic and civil unrests show the many ways racism can kill, whether from COVID, police brutality or hemorrhaging during childbirth.

But if we know how we got here, we know what we must do and undo to get ourselves out. In wealthy countries like the United States there is a grassroots and political call to action for a radical shift in practice to reduce inequities in birth outcomes using respectful maternity care as a model for change. Respectful maternity care is defined as “care provided to all women in a manner that maintains their dignity, privacy and confidentiality, ensures freedom from harm and mistreatment, and enables informed choice and continuous support during labor and childbirth” by the World Healthcare Organization.

The National Birth Equity Collaborative optimizes Black maternal and infant health through training, policy advocacy, research, and community-centered collaboration—including respectful maternity care. In partnership with the Institute for Women and Ethnic Studies (IWES), Tulane University, OVIA, and Johns Hopkins University, we have been asking women across the United States, particularly Black women, about their needs.

What we have learned has the potential to radically transform what it’s like to be pregnant in America. Black birthing people and babies are consistently the most impacted by adverse health outcomes in the United States; therefore, health care systems and quality improvement should be designed with them at the helm. Patients don’t need to be more trusting. Healthcare systems need to be more trustworthy. That means treating everyone as experts in their own bodies. That means

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shared decision making that places the most marginalized at the center. As I always say, there is no quality without equity.

Transforming the maternity care to value Black lives in service of sexual and reproductive wellbeing could not only improve outcomes in America but could have an impact worldwide. Anti-Blackness and gender oppression are worldwide phenomena. The opportunities and risks that Black people experience—whether in Brazil, Botswana or Birmingham—have a common thread because of social construction of race. Whiteness too has a global definition. And so when the West transports its medical systems through international development and philanthropy we replicate the American exceptionalism and white supremacy that is killing so many people right here.

I am committed to dismantling white supremacy. I hope you are too. But I'm also just as committed to Black justice, liberation and joy. And yes, liberation and joy can even be a part of birth. And they are a core tenant of sexual and reproductive wellbeing that values more than mere survival or the absence of disease. That's what birth equity is all about.

Thank you.