

A circular wreath of various botanical illustrations surrounds the central text. The wreath includes green ferns, red maple leaves, yellow flowers, purple flowers, and large green leaves.

The Perinatal Experience of Black Birthing People in Quebec

Tanya Pierre-Sindor

Our Team



Tanya Pierre-Sindor, B.A.

Psychology graduate from McGill University.
Minoring in Gender, Sexuality, Feminism, and
Social Justice studies



Rachel Wilcoxson, M.A.

Holds a Masters of Arts in Media Communication
from Webster University and a Bachelor of Arts
in Speech Communication from Colorado State
University



Introduction



This project addresses the disparities in perinatal experience for Black birthing people in Quebec compared to their White counterparts. While maternal mortality rates in Canada are less alarming than in its Southern neighbour, the lack of interest in determining what factors increase the risks of negative perinatal experiences is alarming.

Methodology



- **Multi-method study**
 - Literature Review with a thematic analysis
 - Single 35-minute interview
- **Keywords**
 - Medical racism, Maternal mortality and morbidity, Black perinatal experience, culturally safe practices, and perinatal outcomes
- **Database used:**
 - Google Scholar, StatsCan, SpringerLink, Journal of Gynecology and Neonatal Nursing, Journal of Obstetrics and Gynecology of Canada and PubMed



Literature Review

A thematic Analysis



American Literature



- Growing body of literature
- Black women are 3 to 4 times more likely to experience maternal mortality than their White counterparts (Howell, E. et al., 2018)
 - COVID-19 (Bond et al., 2022)
- Factors involved in this ongoing crisis
 - Socio-structural determinants of health
 - Discriminatory social contexts
 - Cardiovascular issues
- New healthcare delivery models

Canadian Literature



- **Little research conducted found:**
 - Adverse birth outcomes for Haitians in Quebec (Auger, 2012)
 - Higher rates of stillbirths and increased risks of neonatal and maternal outcomes (Miao et al., 2002)
 - Higher rates of premature births (8.9%) than White counterparts (5.9%) (McKinnen et al., 2016)
- **Major gaps in literature**
 - Colourblind data collection methods



Factors Influencing Maternal Health and Experience

In Quebec





Language of delivery of care

Auger et al, 2023



Language barriers

Especially affects people from cultural diverse backgrounds

- Inaccurate assessment
- Poor examinations
- Erroneous diagnoses
- Fallacious prescribed treatment
- Impedes access to information about their pregnancy
- Misunderstanding consent procedures
- Misunderstanding medical terminology



Lamen, D. (2016). Lost in Translation. [Online image]. Retrieved from <https://isthmus.com/news/news/translation-services-enforcement-is-lax/>



The solution...

Travel farther to obtain perinatal care in
an English-speaking hospital
(or one adapted to their linguistic needs)



The risks of a longer journey



Auger et al., 2023

English-speaking Hospitals

- Preterm births
- Stillbirth
- **Material deprivation in Anglophone communities linked with 1.5 times more risk for stillbirth**

French-speaking Hospitals

- Stillbirths



Healthcare accessibility & Economic stability



- **Gaps in healthcare access** (Lombardo et al., 2014)
 - Lack of culturally sensitive care (Ahmed et al., 2016)
 - Specific pharmaceutical needs, physical therapy, or at-home care



- **Poor living conditions due to low income** (Ray et al., 2018)
 - Increased risks of maternal mortality
 - Harder to maintain healthy habits (Loignon et al., 2015)

Control over Healthcare Provider



- Holds great significance throughout their perinatal journey
- Patient-Physician concordance (Greenwood et al., 2020)
 - Ameliorated rates of common morbidities
 - Fosters more positive experiences
 - Open communication and trust
 - Feel more respect for the patient's values and religion Patient-physician (Alzghoul et al., 2021)
- Emphasis on the need for more diversity within medical institutions
 - Takeshita et al., 20202



Social Support System and Resources



- Health education programs and prenatal courses (Bacciaglua et al., 2023)
- **Protective effect against stress**
 - Intersection of gender and race-based stressors
 - Early role strain
 - Financial stress
 - Family hardships
 - Trauma-related stress





Key Informant Interview

Doula and medical student



How is medical racism addressed in school?

- Often done through White voices
- Large amount of generalizations

Underrepresentation of POC in medical school

- Great initiatives such as the *Black Candidate Pathway*
 - Seeks to increase admission rates of Black students
 - Hasn't yet seen a clear reflection of these efforts in classrooms
 - Both for faculty and students

Importance of being a doula

- Can help substitute social support
 - Patients are able to rely on someone who is informed
 - Reduces the habit of wanting to take on hardship on their own
 - Propose different post-partum practices
- Distrust for healthcare physicians and medical establishments
 - Historical silencing of Black voices and Black pain
 - Lack of empathy towards patients
- Recognizes the scarcity and inaccessibility of the services she offers as a doula
 - Reinforces the factors that can lead to negative perinatal outcomes

Limitations

Participants

- Looking for first-hand experiences
- Published on social media
 - Instagram, Facebook, LinkedIn, etc.
- Monetary incentive
 - Sensitive discussion topic

Time

BLACK MATERNAL EXPERIENCE

IN QUEBEC



WHO ARE WE?

We are a team of researchers pairing up with the Black Community Resource Center in it's *Can We Talk* project to investigate the maternal experience of Black and Indigenous women in Quebec.

WHAT IS THIS ABOUT?

We are asking people who have given birth within the last two years to share their experience. Our goal is to determine if there are any disparities between specific groups in Quebec

You will have to:

- Fill in a survey
- Participate in a 20-30 min interview

FOR MORE INFORMATION

RWMOCHA@HOTMAIL.COM

OR FILL IN THIS FORM
[HTTPS://FORMS.GLE/AT9FXN3YSPP74NHB8](https://forms.gle/AT9FXN3YSPP74NHB8)

WE ARE SEEKING PARTICIPANTS WILLING TO SHARE THEIR MATERNITY EXPERIENCE

CRITERIA:

- ✓ **BLACK BIRTHING PERSON**
- ✓ **HAS GIVEN BIRTH IN THE PAST 2 YEARS**
- ✓ **HAS GIVEN BIRTH IN QUEBEC**

Conclusion



- **Factors leading to negative perinatal experiences**
 - Having access to Black physicians
 - Having a healthy social support system
 - Having access to physicians who speak your language
 - Having access to complimentary medical resources
 - The lack of empathy demonstrated by healthcare professionals
 - Social determinants of health
 - Overall culturally unsafe practices
- **Future studies:**
 - Black non-binary and transgender patients
 - “Black women [have] occupied [the] liminal space of gender ambiguity” (Hayley, 2016)
 - Indigenous birthing people



Thank you



Tanya Pierre-Sindor

Tanya.pierre-Sindor@mail.mcgill.ca

Supervisor: Motunrayo Oyeyemi