

RES 9

SUBJECT: Addressing Disproportionate Perinatal and Infant Mortality in Minority Populations and those Experiencing Racism SUBMITTED BY: Michigan Association of Osteopathic Family Physicians 2022 American College of Osteopathic Family Physicians (ACOFP) REFERRED TO: **Congress of Delegates** RESOLUTION NO. Substitution Resolution 9 (combines Resolutions 9 and 10) 1 WHEREAS, perinatal mortality, defined as during pregnancy and the one-year post-partum, 2 remains a significant clinical and public health problem in the United States impacting 3 approximately 700 women annually¹; and 4 WHEREAS, a majority of perinatal deaths among all ethnic and racial populations were 5 determined to be preventable events (65.8%)²; and 6 WHEREAS, African-American women are 3.2 times more likely compared to non-Hispanic white 7 women to experience perinatal mortality^{3,4}; and 8 WHEREAS, racial and ethnic disparities in perinatal mortality persist across time, age groups, 9 income, and educational level^{3,4}; and 10 WHEREAS, chronic diseases that carry an increased risk of perinatal mortality are more prevalent 11 and less controlled in African American women⁵, such as a higher proportion of 12 cardiovascular events (cardiomyopathy, thrombotic pulmonary embolism, hypertensive 13 disorders) compared to white women³; and 14 WHEREAS, African American women are susceptible to accelerated age-related perinatal 15 mortality likely related to accelerated deterioration of health due to the disproportional 16 impact of psychosocial, economic, and environmental factors compared to whites^{7,8}; and 17 RESOLVED, that the American College of Osteopathic Family Physicians (ACOFP) advocate for 18 federal legislation that increases funding for maternal and infant healthcare; and, be it 19 further 20 RESOLVED, that the ACOFP Diversity, Equity and Inclusion (DEI) Advisory Group consider CME 21 about maternal health (including preconception, prenatal, and postnatal counseling) and 22 infant health so that as family physicians caring for both mother and baby, we can increase 23 our knowledge and understanding to better treat and educate our patients in the hopes of 24 positively impacting infant mortality; and, be it further 25 RESOLVED, that this CME also specifically address health disparities in minority populations and 26 those impacted by racism who are known to be at greater risk of pregnancy related and infant mortality. 27 28 FINAL ACTION: APPROVED as of March 16, 2022 29

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