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**Ohio House of Representatives
Public Health Policy Committee
House Bill 190
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Chair Lipps, Vice Chair Stewart, Ranking Member Liston, and members of the House Public Health Policy Committee, thank you for the opportunity to provide testimony today. My name is Danielle Tong, and I am an executive director of CelebrateOne, Columbus' infant and maternal health collective impact initiative.

Today, I am here both professionally, as an advocate for babies and their families in Central Ohio, and personally, as a Black woman, and mother that experienced life-threateningly adverse health outcomes during the birth of my youngest child. Additionally, I join public health professionals, maternal health professionals, and families across the state in support of House Bill 190. I am providing proponent testimony on a bill which proposes the designation of April 11 through 17 as Black Maternal Health Week. I would like to thank our bill sponsors, Representative Brent and Representative White for their thoughtful leadership and for acknowledging the need to elevate awareness of birthing outcomes for Black women.

Almost eight years ago, at 29 weeks gestation, I experienced an unexpected, life-threatening birthing complication called Placenta Increta. In this condition, the placenta attaches itself deeply into the walls of the uterus and is not prepared to detach after delivery. For me, this caused a spontaneous uterine rupture, serious hemorrhage, life-saving transfusions, a hysterectomy, and the delivery of a premature child. My child, now nearly eight years old, and I experienced a type of good fortune I cannot explain. We both survived by a sliver of mere statistics. Maternal hemorrhage is a leading cause of severe maternal morbidity and mortality, and fetal outcomes are grave, with 98 percent of stillborn fetuses.

I wish I could tell you that my experience was rare; that serious maternal morbidity, and often mortality, especially in Black families was an anomaly, but it is not. I stand before you today because surviving what my family endured is rare. For many Black families, it feels like survival is the anomaly. In 2021, Black babies were over three times more likely to die before their first birthday. Black women are two and a half times more likely to die from pregnancy-related causes. There are a number of reasons for this disparity, which persists beyond socioeconomic status or level of education. Implicit and explicit bias weaved throughout systems and interactions that Black people experience have direct and indirect links to outsized Black infant and maternal mortality rates.

Weathering, a concept first championed by Arline Geronimus, researcher at Harvard T.H. Chan School of Public Health, is a term to describe the effects of consistent exposure to the environmental and societal results of systemic racism. The physiological explanation to weathering is explained through the concept of allostatic load. The long-term accumulation of stress hormone siphons energy from "non-essential"

bodily functions such as a pregnancy. Geronimus' research found that as Black women age, their exposure to environmental and societal racialized stress increases, and their allostatic load increases. The consistent elevation of stress hormone siphons energy necessary to maintain a healthy pregnancy.

Work that CelebrateOne did supports this supposition. In 2021, in partnership with Nationwide Children's Hospital, CelebrateOne published research on the experiences of Black women during their pregnancies. We convened a group of 31 Black women who shared the barriers they encountered during their pregnancies and postpartum. These listening sessions provided insights into some of the ways bias and discrimination can impact mental health, clinical care and, ultimately, infant and maternal health outcomes, despite socioeconomic status. Some of the themes that were uncovered pertained to concerns being dismissed, negative interactions with care providers, anticipation of discrimination, and inequities in care quality, stereotyping, and more.

We have so many poignant quotes from that study, and I will share just one, *"...And even though I had called my doctor and said, Hey, something's not right. You know, I don't feel right. They equated it to round ligament pains.... I didn't know how to express what I was feeling, I guess, appropriately enough for them to understand that something was more serious than what round ligament pains"* This quote essentially summarizes the feeling that Black women have expressed nationwide about not really being listened to, heard, or respected. And that is precisely why Black Maternal Health Week is essential.

An article written by Harvard School of Public Health says it best, "Put Simply, for black women far more than for white women, giving birth can amount to a death sentence. African American women are three to four times more likely to die during or after a delivery..." Black women know this. We feel this in our bodies and we carry this burden into our pregnancies and postpartum care. House Bill 190, recognizing the already nationally recognized Black Maternal Health Week takes Ohio steps in the direction toward awareness and recognition of our humanity, and of our deservedness of a solution.

Thank you to Chair Lipps, Vice Chair Stewart, Ranking Member Liston, and members of the House Public Health Policy Committee, thank you for the opportunity to provide testimony today. I am happy to answer any questions for the committee.