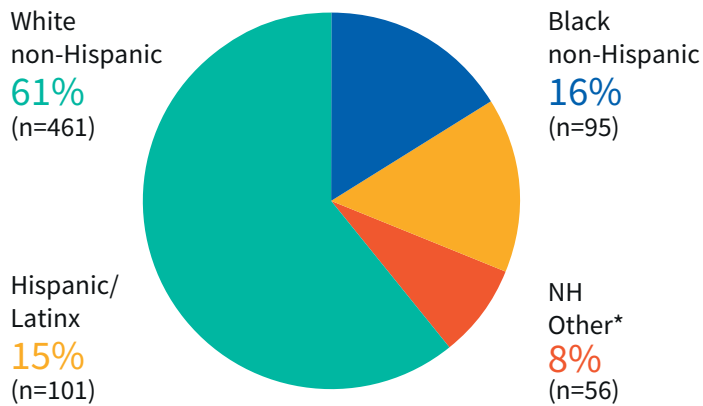


Postpartum Health Indicators

PENNSYLVANIA FACT SHEET

Results shown are self-reported by 719 Pennsylvania respondents to the 2020 Postpartum Assessment of Health Survey (PAHS) at 12-14 months after giving birth. Data was collected from January 2021 to March 2022. Results are weighted to be representative of all postpartum people who had a live birth in Pennsylvania in 2020.

Demographic Characteristics - Race-Ethnicity

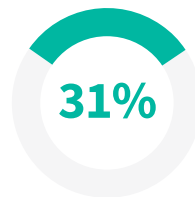


The Department of Health's Bureau of Family Health has a mission to equally protect and equitably promote the health and well-being of pregnant people, their partners, their children, and all families in Pennsylvania. The Bureau of Family Health acknowledges that systemic racism, other forms of oppression, and social, environmental, and economic inequities contribute to poor health outcomes and have a greater impact on health than individual choices, behaviors, or even their access to healthcare. These factors and experiences of discrimination impact a person's health throughout their life and can result in trauma that impacts health across generations. Certain communities and groups that have experienced historic and ongoing discrimination and oppression often experience a higher burden of negative health outcomes as compared to others. Differences in health outcomes are highlighted in this brief as these differences must be identified and addressed in order for all people to attain health and wellness. It is important to note that these differences in health outcomes by race and ethnicity are the result of systematic, unfair, and unjust circumstances.

7%
of overall respondents **did not attend a postpartum visit within two months of childbirth.**



Top reason for not attending a postpartum visit

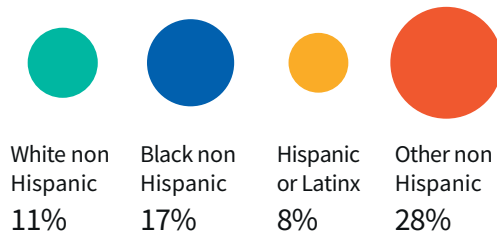


Was in quarantine or concerned about infection from COVID-19.



Any Mistreatment by Care Providers in Childbirth (MCPC)

13%
of overall respondents experienced some form of mistreatment in childbirth.



Group-Based Medical Mistrust Scale (GBMM)

● NH White ● NH Black ● H/L ● NH Other

NH Black and Hispanic/Latinx respondents report higher levels of medical mistrust relative to NH White.

Overall **26**



White non-Hispanic
24
Black non-Hispanic
35
Hispanic or Latinx
29
Other non-Hispanic
27

CI: NH White 4-11, NH Black 4-24, H/L 3-15, NH Other 3-27.
The MCPC scale is a patient-designed and validated measure of mistreatment during childbirth spanning multiple domains: physical abuse, sexual abuse, verbal abuse, neglect and abandonment, poor rapport between the birthing person and providers, loss of confidentiality, and lack of supportive care.

CI: NH White 4-11, NH Black 4-24, H/L 3-15, NH Other 3-27.
The GBMM is 12-item scale that assesses suspicion, experiences of discrimination, and lack of support in the health care setting. A higher score is indicative of greater medical mistrust. Score ranges from lowest possible score of 12 to highest possible score of 60.

Postpartum Health Indicators

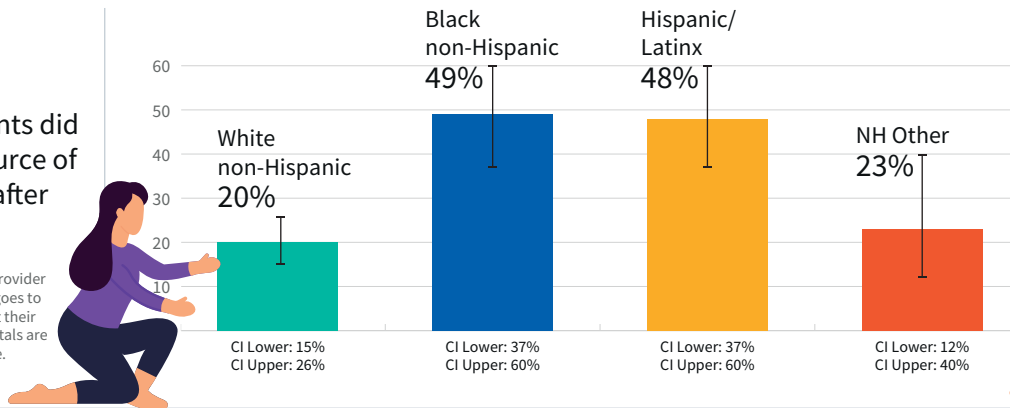
PENNSYLVANIA FACT SHEET

No Usual Source of Care

29%

of overall respondents did not have a usual source of care 12-14 months after childbirth.

A usual source of care is a place or provider that an individual or family usually goes to when sick or in need of advice about their health. Emergency rooms and hospitals are not considered usual sources of care.



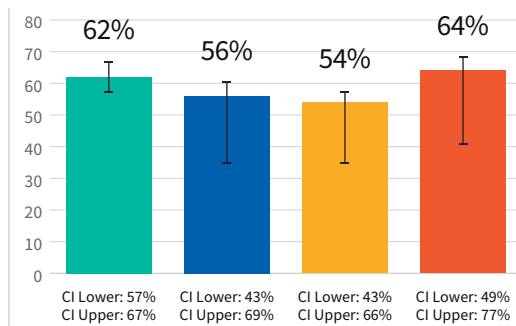
NH Black and Hispanic/Latinx respondents are more likely not to have a usual source of care after childbirth.

Healthcare worker talked to you about any postpartum warning signs

● NH White ● NH Black ● H/L ● NH Other

60%

of overall respondents had a healthcare worker talk to them about postpartum warning signs.



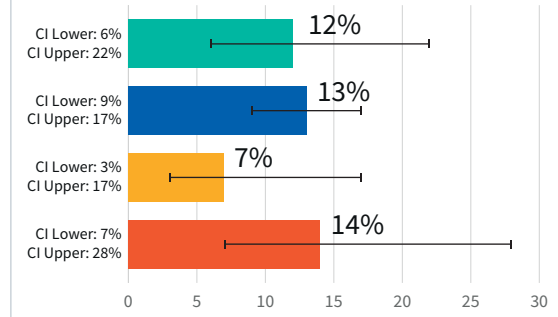
Warning signs included: chest pain, trouble breathing, dizziness/fainting, thoughts of self-harm, excessive bleeding, severe swelling, redness or pain in limbs, fever, migraine, changes in vision, or fatigue.

Low Social Support (MSPSS)

● NH White ● NH Black ● H/L ● NH Other

12%

of overall respondents had low social support 12-14 months after childbirth.



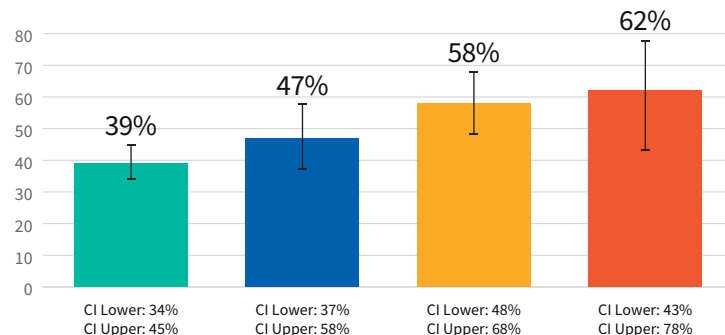
The MSPSS measures perceived adequacy of social support from three sources: family, friends, and significant other. MSPSS score ≤ 9 is indicative of low social support.

No Maternity Leave

● NH White ● NH Black ● H/L ● NH Other

45%

of overall respondents did not take any maternity leave after childbirth.



Minority respondents are less likely to take maternity leave.

*Other non-Hispanic includes people who identify as Asian or Asian-American, Native Hawaiian or Pacific Islander, Native American or Alaskan Native, Southwest Asian, Middle Eastern or North African. The multiple minoritized race group includes people who identify as multiple races but, unlike a typical multiple race category, does not include those who identified as white and a minoritized race as those individuals are now included in the identified minoritized race category. This new categorization allows us to better characterize the differential experience of individuals who identify as more than one minoritized race/ethnicity. Bars represent 95% confidence intervals. Estimates with large confidence intervals should be interpreted with caution. The 2020 PAHS was undertaken by the Columbia World Project, Leveraging policy to improve maternal health in the fourth trimester, Columbia University in the City of New York. More information about PAHS is available at <https://worldprojects.columbia.edu/postpartum-assessment-health-survey-pahs>.