The Cost of Inequality: Maternal Perceptions of Stress and Social Support among Low-Income African-American Women

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ABSTRACT

There are significantly higher rates of adverse birth outcomes among African Americans than Caucasians. This creates a devastating national average of infant mortality rates among African Americans. Studies have investigated socioeconomic status, prenatal care, and maternal behavior as factors contributing to pre-term birth. However, the relationship of maternal perceptions of stress and social support to infant morbidity has yet to be fully explored. This creates room for additional exploration of how these factors contribute to our understanding of pregnancy outcomes for low-income African American women. This study examines the relationship between social support and maternal perceptions of low-income Chicago Englewood residents who are participants in the Healthy Start Initiative (HSI) and members of HSI’s current three-year infant mortality study. Participants were interviewed and asked to share their experiences in relation to stress and social support. The data were used to identify the presence or absence of stress and social support during the prenatal stage of pregnancy. This research contributed to the development of a new assessment tool utilized by the Healthy Start Initiative program. Results contribute to the ongoing investigation of the complex subject of African American infant morbidity and set the stage for a longitudinal study of how stress and social support contribute to African American infant mortality.

RESEARCH QUESTION

What is the relationship between social support and maternal perceptions of stress among low income African American women?

INTRODUCTION

We can conclude that the current research has presented a strong link between infant mortality in relationship to stress and social support for African American women. Although not proven the foundation of supporting factors that build this argument is evident. In conducting this exploratory study, we can begin identifying and assessing perceptions of stress and social support among African American women during the prenatal period. We can hypothesize from our foundation of literature that African American women, who lack formidable social support and experience continual stress during their life course, will present poor birth outcomes. In view of the time limitations of this project we will only assess and investigate the prevalence of stress or lack of social support among low-income African American women. Building from an assessment tool utilized in the Healthy Start Initiative can contribute to identifying these factors and allot a period for intervention.

METHODLOGY

Recruitment

The prenatal participants were low-income residents of the Chicago Englewood community who voluntarily participate in a federally funded Healthy Start Infant Mortality Reduction Initiative. There was a gift card incentive provided to all women who participated in this study.

Sample Description

The prenatal participants were low-income residents of the Chicago Englewood community in Chicago, Illinois. The African American women ranged from ages 17-40.

Procedure

Pilot tested thirteen questions which will be added to the current three year infant mortality study of the Healthy Start Initiative. We used qualitative mix methods of face to face interviews and one focus group.

DESCRIPTION OF TOOL

This project assesses and investigates if there are any detrimental commonalities of stressors and lack of social support. This researcher built from an assessment tool currently functioning in the Greater Englewood community Healthy Start Initiative Program. Directly, this contribution to the current tool identifies factors and allot a period for intervention. The purpose of contributing new questions and pilot testing this tool is to assess these factors, which can begin decreasing the statistical margin of adverse birth outcomes among low income African American women.

RESULTS

The results of this overall project are yet to be determined as it is still in its very early phases. However, the preliminary results show there is a strong correlation to adverse stress and lack of social support to low birth weight outcomes. Directly, majority of participants admitted to continual high levels of stress and limited social support. Participants shared that they only had one person to completely rely on during times of hardship. It can be hypothesized that utilizing this data will enable the Healthy Start Initiative, to effectively improve its efforts to assist with identifying factors, which contribute to maternal stress and social support. This overall evaluation will allow case managers and health care workers to offer services which may lift the burden of hardships.

CONCLUSION

Perceptions of maternal stress and social support were the direct focus of this research. Directly, this is a brief exploratory study and does not investigate each factor that may contribute to poor pregnancy outcomes among African American women. These results simply contribute to the ongoing investigation of the complex subject of African American infant mortality. These findings set the stage for a logical connection and longitudinal study of how stress and social support contribute to African American infant mortality.

REFERENCES


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