The Role of Gendered Racism in Sexual and Reproductive Health Disparities among Black and Latina Women

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Disparities

- % people living w/HIV women -- steadily increased past 2 decades\(^1\)
- Black & Latino Americans disproportionate burden- HIV & other STIs\(^1\)
- Infant mortality Black Americans >2X rate White Americans, explained preterm delivery (< 37 wks) & low birthweight (< 2500 gms)\(^2\)
- Higher rates some subgroups Latino Americans\(^2\)

➢ Factors contributing sexual risk & adverse birth outcomes Black & Latina women

\(^1\)(CDC, 2010; 2011)
\(^2\)(Martin et al., 2012)
Discrimination → Health

- Decades research: discrimination → mental & physical health\(^1\)
- Discrimination (homophobia & racism) → sexual risk behavior\(^2\)
- Discrimination (racism & language-based) → preterm delivery, low birthweight, infant illness 1\(^{st}\) year\(^3\)
- Sample young, urban, socioeconomically disadvantaged, predominantly Black and Latina pregnant women, everyday discrimination 2\(^{nd}\) trimester → greater odds risky partner & contracting new STI by 3\(^{rd}\) trimester & lower birthweight\(^4\)

- All work to date focused on general discrimination or discrimination due to single identity

\(^1\)(Pascoe & Smart Richman, 2009; Williams & Mohammed, 2009)
\(^2\)(Diaz et al., 2004; Roberts et al., 2012; Stevens-Watkins, et al., 2011)
\(^3\)(Dole et al., 2004; Halim et al., 2013; Parker Dominguez et al., 2008)
\(^4\)(Earnshaw, Rosenthal, et al., 2013; Rosenthal et al., 2014)
Gendered Racism

- Intersectionality theory highlights intersecting identities (e.g., gender & race) → UNIQUE experiences, including discrimination\(^1\)
- To understand influence of identities (including discrimination/disadvantage vs privilege) must examine them simultaneously & understand their intersections

- Unique discrimination experienced by Black American women due to intersection race & gender → “gendered racism”\(^2\)
- Discrimination not same experienced by White American women or Black American men; connected to historical oppression

\(^1\)(e.g., Collins, 1990; Crenshaw 1991; Davis, 1981; hooks, 1984)
\(^2\)(Essed, 1991; Jackson et al., 2001; Thomas et al., 2008)
Gendered Racism

Theoretical suggestion:
Gendered racism unique source stress $\rightarrow$ risk adverse birth outcomes & sexual risk

Latinos parallel/intertwined history discrimination with Black Americans, including women

- Medical system history subpar care & abuse communities of color, including specific to women (e.g., forced sterilizations)$^1$ $\rightarrow$ mistrust
- Stereotypes of Black & Latina women related to sexuality & motherhood$^2$

$^1$(Davis, 1981; Washington, 2006)
$^2$(Collins, 1990; hooks, 1990; Roberts, 2002)

(Rosenthal & Lobel, 2011)
Gendered Racism- *Mistrust*

- Although not all know history, mistrust passed intergenerationally → many women of color believe gov’t wants to limit reproduction communities of color & sometimes forces sterilization\(^1\)
- Mistrust → less likely seek reproductive health services & use birth control methods requiring prescription\(^1\)

- Mistrust for Black & Latina women throughout lives & heightened during pregnancy → birth outcomes & sexual behavior

\(^1\)(Bird & Bogart, 2003; Thorburn & Bogart, 2005)

(Rosenthal & Lobel, 2011)
Gendered Racism - Stereotypes

- Stereotypes Black & Latina women (& men) - sexuality & sexual behavior → connected to sexual abuse & sexualized exploitation

- Stereotypes Black & Latina single, young mothers, “welfare queens”

- Stereotypes → discrimination

- Stereotype threat = worry that one will confirm a negative social stereotype or be judged according to it

- Discrimination based on stereotypes & stereotype threat for Black & Latina women throughout lives & heightened during pregnancy → birth outcomes & sexual behavior

1 (Collins, 1990; Davis, 1981; hooks, 1990)

2 (Collins, 1990; Roberts, 2002)

3 (Dovidio & Gaertner, 2010; Rosenthal & Overstreet, 2016)

4 (Steele, 1997)

(Rosenthal & Lobel, 2011)
Gendered Racism- *Stereotypes*

Experimental study varying race & pregnancy status of 25 year-old female target demonstrated continued influence of stereotypes Black compared to White target (regardless of pregnancy) perceived as:

- having more sexual partners in last month, less likely to use birth control regularly
- more likely to have children & have been pregnant before
- more likely to be receiving public assistance, having lower level of education, having lower yearly salary

Black compared to White pregnant target perceived as:

- less likely father would be involved in raising child
- more likely would need public assistance to help raise child

(Rosenthal & Lobel, in press)
Current Investigation

- Cross-sectional online study: diverse women across U.S.
- Further develop & validate gendered racism stereotypes measure & include measure of mistrust $\Rightarrow$ gendered racism associated more strongly with pregnancy-specific stress & relationship power than general everyday discrimination measure?
- *Relationship power* = ability to make decisions in relationships, including for sex & condom use $\Rightarrow$ sexual risk among women$^1$
- *Pregnancy-specific stress* = stress about pregnancy itself (e.g., physical symptoms & changes, labor & delivery, parenting, health of fetus/baby) $\Rightarrow$ risk adverse birth outcomes$^2$

$^1$(Pulerwitz et al., 2000; Rosenthal & Levy, 2010)

$^2$(Alderdice et al., 2012; Dunkel-Schetter & Lobel, 2012; Lobel et al., 2008)
Procedure & Participants

• Diverse women 18 years & older & living in U.S. recruited online: from across U.S., completed online survey

• 343 women currently pregnant or at least 1 child; Black, Latina, or White; & all data- asked about current or most recent pregnancy:
  – 122 pregnant, 221 at least 1 child
  – 53 Black, 66 Latina, 35 Multiracial incl Black &/or Latina, 189 White
  – 310 born in U.S.
  – Mean age = 29.49, SD = 8.46
Gendered Racism-Stereotypes Measure

30 items General & Pregnancy-Specific Discrimination due to Unique Stereotypes: frequency & worry (Rosenthal & Lobel; α= .97)

- 18 general: e.g., “How often do you feel that people make negative assumptions about how many sexual partners you have based on being a woman of your racial/ethnic background?”; “How much does this bother, upset, or worry you?”
- 12 pregnancy-specific: e.g., “During your most recent pregnancy, how often did you feel that people were making negative assumptions about whether you would need some form of public assistance to help with your child based on being a woman of your racial/ethnic background?”; “How much does this bother, upset, or worry you?”
- 1-4 response scales (never – often; not at all – very much)
10-item Mistrust due to History of Forced Sterilizations measure - existing “Birth Control Conspiracies” measure (Bird & Bogart, 2003; α = .80)

- e.g., “Poor and minority women are sometimes forced to be sterilized by the government”

10-item Everyday Discrimination Scale (Lewis et al., 2006; Williams et al., 1997; α = .90)

- e.g., “In your day-to-day life, how often are you treated with less respect than other people?”
17-item Revised Prenatal Distress Questionnaire (Yali & Lobel, 1999; α= .88)
  • e.g., “Did you feel bothered, upset, or worried during your pregnancy about whether you might have an unhealthy baby?”

4-item Sexual Relationship Power Scale (Pulerwitz et al., 2000; α= .60)
  • e.g., “When I am in a relationship, I typically feel like I have the power and ability to make decisions about when condoms are used during sex.”
Controls/Participant Characteristics

- Age, if born in U.S., if English first language, social class, if Associate’s degree or higher education, if currently pregnant
- How felt about pregnancy: “After you found out that you were pregnant the most recent time, how did you feel?” 1 (I was excited) to 4 (I did not want to be pregnant) scale
Racial/Ethnic Differences in Discrimination

MANOVA comparing Black, Latina, Multiracial, White women significant differences:

- both gendered racism (stereotypes & mistrust) measures ($F$s > 17, $ps < .001); but not everyday discrimination ($F$=1.21, $p$ = .308)

Bonferroni post-hoc analyses test where differences are:

- Both gendered racism measures, White women *significantly lower* means than Black, Latina, & Multiracial women
- *No significant differences* between Black, Latina, & Multiracial women

- Combined Black, Latina, & Multiracial women vs. White women
prenancy-specific stress model

Indirect Effects NS everyday discrimination & mistrust; Significant gendered racism-stereotypes: $B = .10^*, SE = .03$

Bootstrapping mediation analysis (unstandardized Bs shown): controlling participant characteristics; how felt when found out pregnant
Indirect Effects NS everyday discrimination & stereotypes; Significant gendered racism-mistrust: B = -.07*, SE = .02

Bootstrapping mediation analysis (unstandardized Bs shown): controlling participant characteristics; how felt when found out pregnant
Summary

• Black & Latina women greater pregnancy-specific stress through greater discrimination due to unique stereotypes; lower relationship power through greater mistrust due to history of forced sterilizations
• Gendered racism variables stronger associations with pregnancy-specific stress & relationship power than general discrimination
• Gendered racism may help understand disparities birth outcomes & sexual risk
Thank You!

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