

Dalila Grant

Prof. Brown

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Connections Between Race and Neglected Women

The trend of deaths surrounding Black, Indian/Alaska Native American, and Hispanic women during pregnancy or postpartum has led to investigations by the Center for Disease and Prevention (C.D.C). The evidence produced in the scholarly article analysis is written in an Introduction, Methods, Results, Abstract, and Discussion (IMRAD) format. More specifically, the information provided in the article is called “Vital Signs: Pregnancy-Related Deaths, United States, 2011–2015, and Strategies for Prevention, 13 States, 2013–2017” by Emily E. Peterson, MD; Nicole L. Davis, Ph.D., etc. Thus, this section allows the audience/reader to understand the topic clearly and ensures that the article is written based on facts, not opinions. The IMRAD formatting strengthens the claims presented in the article by having a solid structure report that includes extensive evidence to further develop the claim of women of color being neglected during/post labor.

The IMRAD format allows the reader to clearly understand the line reason to be presented through each section and a formal hypothesis. The scientific report is written professionally in a passive tone without bias being included while shifting past and present tense. The first section, the Abstract, begins with the topic: “approximately 700 women die annually in the United States from pregnancy-related complications” (Petersen et al., 2019, p.1). Having this sentence as the opener to the scientific article allows the reader to understand what will follow in

the next couple of sections without being too descriptive about the topic. The sentence is also written in the present tense and a passive tone. An example of the passive tone and past tense is in the Methods section, which states, “cause and timing of pregnancy-related deaths were analyzed” (Petersen et al., 2019, p.2).

The results section provides adequate data to support the claim presented. It also includes the past tense and passive tone. In the results section, it states, “the highest PRMRs were in women who were black (42.8) and American Indian/Alaska Native (32.5); these PRMRs were 3.3 and 2.5 times as high....as were those in white women (13.0)” (Petersen et al., 2019, p.3). Lastly, the discussion states, “...first, errors in reported pregnancy status on the death certificates have been described, potentially leading to overestimation or underestimation of the number of pregnancy-related deaths” (Petersen et al., 2019, p.4). The discussion section restates the hypothesis and includes prevention requirements that have been added to ensure the safety of women of color while adding how some of the information presented may be subjected to limitations. This allows the reader to understand that human error is possible and that not everything may be how it appears.

Overall, the IMRAD section of the scholarly article further supports the claim that Black women and other women of color are overlooked during pregnancy and postpartum. This is done by having a well-formatted report section with all the necessary subscripts and a well-written/informative introduction, methods, results, abstract, and discussion ensure the safety of women of color.

References

Petersen, E. E., Davis, N. L., Goodman, D., Cox, S., Mayes, N., Johnston, E., Syverson, C., Seed, K., Shapiro-Mendoza, C. K., Callaghan, W. M., & Barfield, W. (2019c). Vital Signs: Pregnancy-Related Deaths, United States, 2011–2015, and Strategies for Prevention, 13 States, 2013–2017. *MMWR. Morbidity and Mortality Weekly Report*, 68(18). <https://doi.org/10.15585/mmwr.mm6818e1>