

## MENDS

### Resource Sheet

#### Patient rights

This document provides additional information and resources about the following community-generated recommendation for hospitals:



**“Provide the Black Birthing Bill of Rights to all patients and be well-versed in it.”**

#### The Current Challenge:

There is a scarcity of research on how presenting patient rights to patients may affect their care. Most existing research on this topic has been conducted outside of the United States and, to our knowledge, no studies have assessed how displaying the rights of pregnant and birthing people may impact how patients and providers understand and act on them.<sup>1-5</sup>

Hospitals are legally required to provide patients with information about their rights, which are typically communicated to them through written documents provided at admission. However, studies have found that the reading level of these documents often far exceeds the average reading level of U.S. adults, making them inaccessible to many patients.<sup>6</sup> National data show that a substantial proportion of patients have limited health literacy, especially groups disproportionately burdened by worse health outcomes and who face discrimination in healthcare settings (e.g., racial/ethnic minorities, those with less formal education), exacerbating health inequities.<sup>7-10</sup> As such, there is substantial opportunity for hospitals to communicate information about patient rights in more accessible ways.

#### How the MENDS Community Recommendations could help:

In our sessions, participants repeatedly emphasized that they would benefit from hospitals presenting clear information to them about their rights in labor and delivery. They also wanted staff and providers to thoroughly understand these rights to be able to empower patients, foster respectful care, and facilitates accountability between the hospital and the community. The Black Birthing Bill of Rights (BBBR) is a widely known resource for patients and care providers that resonated with our community experts. It was developed by the National Association to Advance Black Birth (NAABB) and published in 2020 as a resource to help Black woman and birthing people know and exercise their rights, and as guidance for hospitals and other stakeholders in maternal health to “transform their policies, procedures, and practices to meet the needs of Black birthing people.”<sup>11</sup>

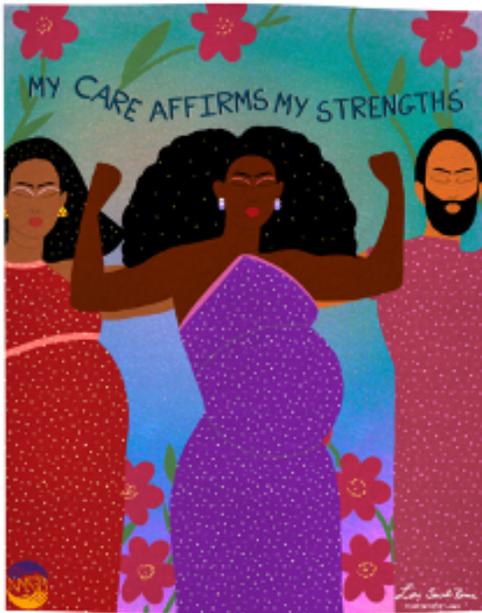
## Implementation Considerations & Strategies:

Hospitals may consider taking measures to improve patient awareness of rights before, during, and after childbirth. This may include the following:

- **Provide the Black Birthing Bill of Rights in exam rooms and labor and delivery rooms:** The BBBR is a 21-page document in total, with 15 pages that display patient rights with colorful artwork and an additional 3 pages that contain linked resources for patients. Therefore, it may not be feasible to display it on the wall of every room. We suggest the following alternatives, and recommend that hospitals engage community advisors and patient advocates to develop a strategy that meets the needs of their patient communities:
  - Display the BBBR as artwork on the walls of waiting rooms, hallways, or other public spaces in the hospital (with permission from NAABB; info below).
  - Provide the BBBR in full as a laminated booklet that is available in each patient room.
  - Display a labeled QR code that links to the NAABB website where patients can access a copy of the BBBR.
  - Encourage and facilitate patient access to the above resources in the prenatal setting (e.g., by disseminating to local and partnered clinics).
- **Facilitate staff, provider, and clinical team understanding of the BBBR:** In our sessions, participants also voiced the importance of their care teams being well-versed in the BBBR. Hospitals could introduce care team members to the BBBR through continuous education or staff meetings.
- **Explore how patients' awareness of their rights, and how displaying patient rights, impacts how patients and care teams understand and act on them.** As noted, there is a scarcity of research in the US on this topic. That this was one of the highest ranked recommendations from our community speaks to its importance and points to an opportunity for much-needed research. This may be a compelling research opportunity for a resident and/or fellow, who would ideally partner with community members and research mentors to understand appropriate and ethical research design for patient-facing research.



## BLACK BIRTHING BILL OF RIGHTS

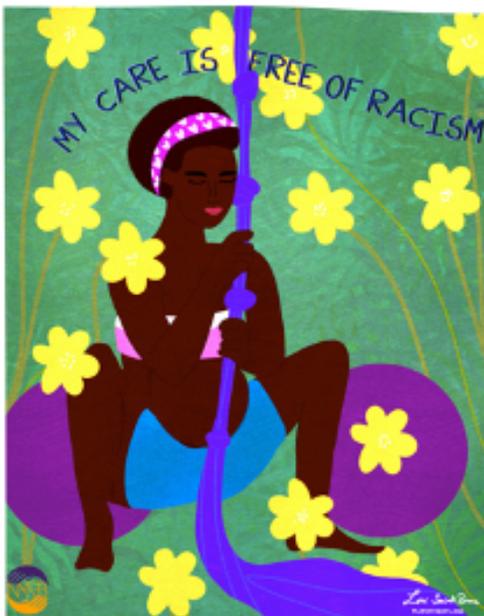


I HAVE THE RIGHT TO RECEIVE CARE THAT ACKNOWLEDGES AND AFFIRMS MY STRENGTHS.

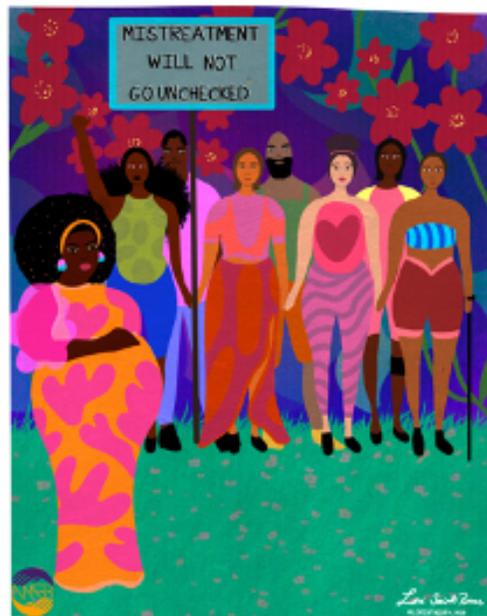


I HAVE THE RIGHT TO INCORPORATE MY FAITH, TRADITIONS, AND CULTURAL PRACTICES INTO MY CARE AND BIRTHING EXPERIENCE.

## BLACK BIRTHING BILL OF RIGHTS



I HAVE THE RIGHT TO RECEIVE CARE THAT IS FREE FROM RACISM, DISCRIMINATION, AND OBSTETRIC VIOLENCE.



I HAVE THE RIGHT TO ACCESS REMEDIES IF I AM MISTREATED, NEGLECTED, DISCRIMINATED AGAINST, OR VIOLATED IN ANY WAY.

*Excerpt from the Black Birthing Bill of Rights, p. 5- 6*

## Resources:

- [Black Birthing Bill of Rights Download](#)

*As of August 1, 2025, the Black Birthing Bill of Rights is available as a free download on the NAABB website. It is protected by copyright and may not be reproduced or distributed without permission from the NAABB. However, providing patients with the BBR is well aligned with the NAABB's mission and we anticipate that permission would not be withheld if requested. Permission can be requested [here](#).*

*Note: This is a dynamic resource sheet that will evolve as more evidence becomes available on interventions that support this recommendation. Last Updated January 2026.*

## References:

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