



CITY OF NEW YORK  
**MANHATTAN COMMUNITY BOARD FOUR**

424 West 33<sup>rd</sup> Street, Suite #580  
New York, NY 10001  
tel: 212-736-4536

<https://cbmanhattan.cityofnewyork.us/cb4/>

**LOWELL D. KERN**  
Chair

**JESSE R. BODINE**  
District Manager

July 19, 2021

Dr. Dave A. Chokshi  
Commissioner  
Dept. of Health & Mental Hygiene  
42-09 28<sup>th</sup> Street  
Long Island City, NY 11101

Dear Commissioner Dr. Chokshi,

On April 15, 2021 at Manhattan Community Board 4's (MCB4) Housing, Health, and Human Services (HHHS) monthly committee meeting, members were briefed on NYC maternal mortality and morbidity by Dr. Amitasrigowri Murthy, MD, MPH, Acting Medical Director of the Bureau of Maternal Infant and Reproductive Health at the NYC Department of Health. Dr. Murthy presented the causes and efforts to reduce current rates of maternal mortality and morbidity.

On the recommendation of the HHHS Committee, MCB4's Full Board at its regularly scheduled meeting on May 5, 2021, voted in favor, opposed, abstaining, and present but not eligible to vote, to support the following:

- H.R.959 - Black Maternal Health Momnibus Act of 2021<sup>1</sup>
- H.R.945 - To direct Health and Human Services to issue guidance to States to educate providers about the process of delivering respectful maternal health care through diverse and multidisciplinary care provider models<sup>2</sup>
- Increased funding for New York City programs to support women through the journey of pregnancy such as:
  - The Nurse Family Partnership
  - Doulas
  - Midwives
- Expansion of postpartum Medicaid coverage in New York State

After additional consultation with the Dr. Murthy, the Committee also urges City Council to continue its progress towards passing the 2020 package of maternal mortality protection legislation.<sup>3</sup>

**Background**

*Maternal Mortality and Morbidity Rates in New York*

In the United States, rates of maternal mortality<sup>4</sup> have increased, while in other developed nations, rates have decreased. According to the Centers for Disease Control and Prevention, in 2018 (the latest provided) the national rate was 17.4 deaths per 100,000 live births in the United States, and in New York State (NYS), the rate was 20.8 deaths per 100,000 live births.

New York State ranked 46<sup>th</sup> out of the 50 states in rates of maternal mortality as recently as 2010.<sup>5</sup> Since that time, rates of maternal mortality have improved. As of 2016, New York State ranks 30<sup>th</sup> among the 50 states.<sup>6</sup> The top five causes of maternal related deaths in NYS between 2012-2014 were due to: Embolism (24%), Hemorrhage (16%), Infection (16%), Cardiomyopathy (12%), Hypertensive disorders (7%).<sup>7</sup>

According to the presentation and several sources, maternal mortality is the “tip of the iceberg.” Severe maternal morbidity (SMM)<sup>8</sup> occurs much more often. The most common incidences of SMM are bleeding, blood clots, kidney failure, stroke, or heart attack. In NYC, about 3,000 women experience a life-threatening event during childbirth of SMM, and in NYC, the rate increased by 34% from 2008 to 2014.<sup>9</sup> In 2018, NYC had the highest rate of SMM compared to any other region in the state.<sup>10</sup>

#### *Racial & Ethnic Disparity in Maternal Mortality and Morbidity Rates*

Maternal mortality and morbidity is a public health crisis for black women. In NYC non-Latina Black women are impacted at a higher rate than any other ethnicity, in fact this is accurate for the entire country.<sup>11 12</sup> This is acknowledged annually for Black Maternal Health week from April 11-17<sup>th</sup>, 2021. The U.S. Department of Health and Human Services also recognized this during 2021 by expanding funding for care in rural areas.<sup>13</sup>

New York City’s maternal mortality and morbidity rates are highest among non-Latina Black women. In NYC black women are *eight* times more likely than white mothers to die from pregnancy related causes and *three* times more likely to experience SMM.<sup>14</sup> Non-Latina Black women are also *three* times more likely to experience SMM.<sup>15</sup>

When considering other demographics, research has found that Black women with a college degree are more likely to have SMM than other races who did not graduate high school. Black women who have a healthy weight are more likely to have SMM compared to women of other races who are considered obese. Also, black women, regardless of if they have Medicaid or private insurance are impacted more often by SMM than women of other races as well as being irrespective of what kind of delivery they had.<sup>16</sup>

The factors that are driving inequity causing high rates among Black and Latino women in the rates of maternal mortality and SMM are implicit bias and racism, at both institutional and policy levels.<sup>17 18 19 20</sup> Inequitable policies *and* practices in the health, education, housing, and employment industries, increase the likelihood that Black and Latino women will experience disrespectful care, inadequate housing or access to quality foods and medical resources, lower incomes and/or unemployment.

## Conclusion

In order to address maternal mortality and morbidity, which is often preventable, NYCDOH developed a campaign known as *Standards for Respectful Care at Birth* to educate women on their rights to “respectful, safe and quality care during your birthing experience.”<sup>21</sup> The campaign also highlights rights in decision making and informed consent in women’s medical care.

While MCB4 commends the City for this awareness campaign, much more needs to be done.

Through the presentation the Committee learned that occurrences of severe maternal mortality and morbidity in MCB4 are low. However, there are steps MCB4 can take to further reduce such cases in our district, which would impact *overall* rates in NYC.

1. Support the Black Maternal Health Momnibus Act of 2021 – the Act comprises of 12 bills, including but not limited to, make critical investments in social determinants of health, funding community-based organizations, working towards improving maternal health outcomes, improving data collection and problem solving, investing in digital tools like telehealth in underserved areas, studying the unique risks faced by pregnant and postpartum veterans, and continuing efforts to expand and diversify the perinatal workforce.<sup>22</sup>
2. H.R. 945 would direct the Secretary of Health and Human Services to provide guidance to States to educate providers, managed care entities, and other insurers about delivering respectful maternal health care through diverse and multidisciplinary care provider models, and for other purposes.
3. Increase funding for the Nurse Family Partnership - more funding is needed to expand coverage for this home visiting program that begins during pregnancy for first time mothers until their child is two. The program helps vulnerable mothers, babies and families with crucial support including clinical assessments, guidance, and education.<sup>23</sup>
4. Expand Postpartum Medicaid Coverage - expanding coverage for women from 60 days to one year postpartum will help new mothers with ongoing health care needs including, but not limited to, assessing pregnancy/postpartum complications, managing chronic health conditions such as cardiovascular disease, assessing hypertension and diabetes, increasing access to family planning, and addressing mental health concerns.

MCB4 also recognizes and supports City Council’s efforts to reduce maternal mortality and morbidity through the following 2020 legislative package<sup>24</sup>:

- Resolution 1239-2020: Making doulas more accessible to individuals with Medicaid & those without health insurance.

- Introduction 2042-2020: Expanding online access and information on licensed midwives.
- Resolution 1408-2020: State accreditation, approval & operation of midwifery birth centers.

We appreciate the informative presentation and the continued work of NYCDOH and NYS to combat this important issue.

Sincerely,



Lowell D. Kern  
Chair  
Manhattan  
Community Board 4

Maria Ortiz  
Co-Chair  
Housing, Health  
Human Services Committee

Joe Restuccia,  
Co-Chair  
Housing, Health  
Human Services Committee

cc:

Hon. Bill de Blasio, New York City Mayor  
Hon. Corey Johnson, Speaker, New York City Council  
Hon. Gale A. Brewer, Manhattan Borough President  
Hon. Jerry Nadler, U.S. Congress  
Hon. Brad Hoylman, New York State Senate  
Hon. Robert Jackson, New York State Senate  
Hon. Richard Gottfried, New York State Assembly  
Hon. Linda B. Rosenthal, New York State Assembly