National Hispanic Medical Association

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Discussion points

• Latest birth statistics
• Maternal Mortality & Severe Maternal Morbidity
• Infant Mortality
Birth Statistics
Overall births in NYC vary by race/ethnic groups.

Source: NYC Bureau of Vital Statistics
Maternal mortality and 
Severe maternal morbidity
Maternal mortality is rising in the U.S. as it declines elsewhere.

Source: Kassebaum et. al, 2016
Maternal mortality rate increased 24% from 2007-2014 in Bronx.

Source: New York State Department of Health, Vital Statistics Unit.
Near Miss
Severe Maternal Morbidity
Maternal Deaths
Morbidity
Severe maternal morbidity increased 28% from 2008-2012 in New York City.

*Severe maternal morbidity is a life-threatening complication during delivery.

Source: NYC Department of Health
Communities in Brooklyn and the Bronx had the highest rates of Severe Maternal Morbidity.

*Severe Maternal Morbidity by Community District of Residence, NYC, 2008-2012*

Source: New York City Department of Health and Mental Hygiene, 2016
Black women were 3x as likely to experience SMM as White women.

Severe Maternal Morbidity by Race/Ethnicity, NYC, 2008-2012

Source: New York City Department of Health and Mental Hygiene, 2016
Infant Mortality
Infant mortality has decreased dramatically in NYC.
The Bronx and Brooklyn carry a disproportionate burden of infant mortality rate.

Source: NYC Bureau of Vital Statistics

*See Technical Notes: Community District (CD).
†Due to instability in the infant mortality rates by community district, rates are presented as three-year averages.
Many communities experience higher infant mortality rates than NYC average.

Infant mortality per 1,000 live births, 2014-2016

- New York City: 4.1
- Hunts Point: 2.7
- Concourse, Highbridge: 3.4
- Throgs Neck: 3.9
- East Tremont: 4.1
- Fordham: 4.2
- Riverdale: 4.3
- Motthaven: 4.6
- University/Morris Heights: 4.6
- Morrisania: 4.8
- Unionport, Soundview: 5.8
- Williamsbridge: 6.2
- Pelham Parkway: 7.8
There is a differential decline in Infant Mortality Rate by race/ethnicity.
Infant Mortality Rate is higher among some racial/ethnic groups compared to Non-Hispanic Whites.
Summary

• Maternal mortality rates are increasing in the United States though the rates are decreasing in other industrialized countries.

• The maternal mortality rate, severe maternal morbidity, and the infant morality rates are disparate across NYC.

• Inequities persist in NYC with non-Hispanic Blacks and Latinas having significantly higher rates than non-Hispanic whites.
Thank You!
Extra Slides
The role of racism on infant mortality
Perinatal Periods of Risk (PPOR) is a method of analyzing fetal and infant mortality in order to identify:

- Population groups with disproportionately high fetal-infant mortality rates (FIMR).
- Periods of risk that are contributing to “excess” FIMR.
- Factors contributing to disparities including:
  - social determinants;
  - health care system barriers;
  - and health behaviors.
Phase 2 analyses use **birth and death records** and other data to:

- **Identify pathways / mechanisms** for excess feto-infant mortality with:
  - **Cause-specific mortality rates** for deaths in Infant Health period
  - **Birth weight distribution and birthweight-specific mortality** for deaths in the Maternal Health / Prematurity period

- **Estimate the prevalence of risk and preventive factors**, comparing study and reference populations with ratios or differences.

- **Estimate the impact of risk and preventive factors** using population-attributable risk percentage (PAR%).