



**BRONX BOROUGH PRESIDENT VANESSA L. GIBSON**

April 12, 2022

The Honorable Kathy Hochul  
Governor, New York State  
NYS State Capitol Building  
Albany, NY 12224

Dear Governor Hochul:

As we recognize **Black Maternal Health Week** between April 11 and 17 this year, I want to commend you for your commitment to fighting the surge of maternal mortality and morbidity across New York. The high rates of Black maternal mortality and morbidity we are seeing across our borough, city, and state indicate an urgent health crisis that we must address. It is our responsibility to ensure the welfare of all of our residents, and I believe the three policy recommendations outlined in this letter are an important step towards protecting women and birthing persons during pregnancy, childbirth, and the postpartum period.

The Bronx is one of the epicenters of maternal mortality in New York State. According to New York City data, the maternal mortality rate in The Bronx in 2014 was 36.2 per 100,000 as compared with 18.9 per 100,000 citywide. Additionally, Black women citywide had a death rate of 51.0 per 100,000 – more than eight times the rate for White women. This striking disparity persists after accounting for socioeconomic status, clearly showing the effects of systemic racism on healthcare outcomes in our city.

These numbers show the urgency of tackling the maternal mortality problem in The Bronx. The following three recommendations will help to address both the high levels of mortality and morbidity but also the racial disparity that leaves Black women particularly vulnerable to adverse outcomes in pregnancy and childbirth.

Birth workers such as midwives and doulas are an important part of the health worker landscape in The Bronx and across the state, but they need better support. Many facilities do not have midwifery services, but patients can retain a doula independently. Doulas prepare, educate, and

empower pregnant women to advocate for themselves throughout their perinatal care. Mayor Eric Adams [recently announced](#) funding for 500 families to have access to free doula services. This is a strong start – but it is only a start. New York should do much more to support families that could benefit from these services. The presence of doulas improves the safety and overall outcomes of the birth experience; they reduce stress and can blunt the adverse effects of systemic racism in our healthcare system, which often renders pregnant Black women marginalized and unheard.

New York lags behind other states when it comes to funding doula services through Medicaid. As part of the Medicaid [pilot](#), which was limited to Erie County and parts of Brooklyn, a doula could be reimbursed at a maximum of \$600 for eight pre and postpartum visits and the birth. [New Jersey](#) offers full statewide doula coverage for the same number of visits at \$900, while doulas in [Virginia](#) get \$1,059 after incentives. **New York should extend doula coverage statewide, on a permanent basis, and increase the reimbursement rate to match our peer states.** As of December 2021, 17 states were offering or are on the path to providing statewide doula coverage through Medicaid. New York is at a historic moment, with a female leadership team at the Borough, New York City Council and the State level. As such, we must move to *lead* this progressive national effort to support an essential maternal health workforce and to affirm their value in mitigating the current health crisis by paying them competitive, living wages across the state.

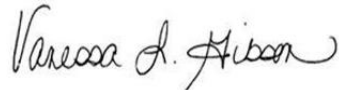
Another key change that can help women have safer childbirth is to ensure that medical records are truly portable and readily accessible by any birthing facility. Most pregnant women do not give birth at the same place where they receive their prenatal care, and this puts mother and baby at risk when the patient’s most up-to-date health records cannot be located. Women in The Bronx have died or experienced serious complications because healthcare workers at the birth facility were not aware of the expectant mother’s underlying conditions. Some health systems ensure that the patient can access her own EMR through mobile devices. **The New York State Department of Health should strictly enforce hospitals and other facilities’ compliance with health record sharing through the Regional Health Information Organizations (RHIOs) and SHIN-NY.** Portable health records are a best practice that can save lives.

Finally, to combat bias in the care of expectant mothers, New York City established the [Standards for Respectful Care at Birth](#) in 2018. These Standards fall under the categories of education, decision-making, quality of care, informed consent, dignity and nondiscrimination, and support.

Every person has the right to control decisions affecting their body, and these standards help to inform pregnant women and healthcare workers of those rights. **The State should adopt these or comparable Standards, as a required notification of patient rights at all hospitals and birthing facilities.** No matter where a woman lives or gives birth, she is entitled to respectful treatment and a standard of care equal to every other woman in New York. Ensuring that these standards of respectful care at birth become *universal* will help tackle the racial disparities in adverse maternal outcomes affecting women all across New York.

You have been a valuable partner in combatting maternal mortality and severe morbidity, as well as the racial disparities in our healthcare system, and I look forward to continuing to collaborate with your administration on making sure that no woman dies before, during, or after childbirth.

Sincerely,

A handwritten signature in cursive script that reads "Vanessa L. Gibson".

Vanessa L. Gibson

Bronx Borough President