

***Promising Practices to Improve Birth Outcomes:  
What Can We Learn from New York?***

MCHB Technical Assistance Project

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## ***Promising Practices to Improve Birth Outcomes: What Can We Learn from New York?***

*Among states with more than 10 percent of births to African American women in 2007,*

- New York had the ***lowest African-American infant mortality rate*** (11.7/1,000) during 2003-2005;
- New York had the ***lowest white infant mortality rate*** (4.65/1,000) during 2003-2005; and
- New York had the ***lowest neo-natal and lowest post neo-natal infant mortality rates*** in 2007.

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There are three objectives of this TA project,

- 1. Identify possible reasons why New York has been able to do significantly better regarding African-American infant mortality than other states with large numbers and percentages of African-American births;**
- 2. Provide some specific information about the policies and programs implemented by New York that can be reviewed and perhaps adopted by other states who want to undertake new efforts to lower African-American infant mortality and improve racial disparities in birth outcomes; and**
- 3. Highlight some unanswered questions raised by this exploratory analysis that can be the focus of future studies, e.g., why do states with relatively small percentages of African-American infants generally have the lowest African-American infant mortality rates?**

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**Table 1- Infant Mortality Rate and B/W IM ratio (2003-2005)  
for the 10 States with the *Most* African-American Births**

<u>STATE</u>	<u>A-A Births</u>	<u>A-A IMR</u>	<u>W IMR</u>	<u>B/W IM Ratio</u>
1. California	31,777	11.40	4.63	2.46
2. New York	<b>42,738</b>	<b>11.77</b>	<b>4.65</b>	<b>2.53</b>
3. Texas	46,397	12.41	5.92	2.10
4. Florida	51,835	12.92	5.79	2.23
5. Georgia	49,278	13.27	6.13	2.16
6. Maryland	26,198	13.66	5.80	2.35
7. Louisiana	25,343	13.94	7.09	<u>1.96</u>
8. Illinois	31,655	15.27	5.95	2.57
9. N. Carolina	30,635	15.77	6.33	2.49
10. Michigan	22,343	16.38	6.15	2.66

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Table 2- States with the ***Lowest*** African-American Infant Mortality Rates, by percent and number of African-American (A-A) Births

<u>States</u>	<u>A-A IMR (2003-05)</u>	<u>Percent A-A Births (2007)</u>	<u>Number A-A Births (2007)</u>
1. <b>Oregon</b>	<b>8.58</b>	<b>2.3%</b>	<b>1,145</b>
2. Minnesota	8.86	8.9	6,615
3. <b>Washington</b>	<b>8.96</b>	<b>4.2</b>	<b>3,812</b>
4. Massachusetts	10.02	9.3	7,262
5. Rhode Island	10.80	8.4	1,045
6. Kentucky	10.92	9.1	5,418
7. Iowa	10.97	4.4	1,804
8. Arizona	11.22	3.8	6,700
9. <b>California</b>	<b>11.40</b>	<b>5.6</b>	<b>31,777</b>
10. New York	11.77	16.9	42,738

source: Mathews TJ and Mac Dorman, MF, Infant Mortality statistics from the 2003-2005 period linked

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**New York has developed a multifaceted strategy to improve birth outcomes by implementing:**

1. an aggressive program of providing outreach and other support services to pregnant women and new mothers;
2. a comprehensive regionalized system of care that included upgrading all obstetrical hospitals for each designated level of perinatal care in accordance with current ACOG/AAP guidelines for perinatal services;
3. collaborative relationships with community based groups as well as medical providers in regional forums;
4. a statewide perinatal data system that is readily accessible to hospitals for quality improvement and to public health staff for monitoring purposes; and
5. extensive family planning and STD treatment and monitoring programs.

**source: New York State Department of Health, *Strategies to Improve Birth Outcomes*.**

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## **Reviewing the Evidence on New York's Strategies**

	<b><u>Relative Performance</u></b>
• <i>Providing Prenatal Care in the First Trimester</i>	X
• <i>Providing the Recommended Number of Prenatal Care Visits</i>	X
• <i>Reducing Births to Teens</i>	X
• <i>Reducing Smoking</i>	X
• <i>Reducing Low Birth Weight</i>	X
• <i>Raising Prenatal/Perinatal Regionalization Standards</i>	√
• <i>Implementing Community Based Regionalization Model</i>	√

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**Table 3 - Percent of VLBW Infants Delivered at Facilities for High-Risk Deliveries in the 10 States with the Most African-American Births**

<u>State</u>	<u>Percent VLBW Delivered at Facilities for High-Risk</u>	<u>Neo-Natal Mortality Rate</u>	<u>Post Neo-Natal Mortality Rate</u>
1. <b>New York</b>	<b>88.6.</b>	<b>3.8</b>	<b>1.8</b>
2. Florida	88.1	4.4	2.6
3. Louisiana	88.1	5.8	4.3
4. Michigan	87.8	6.8	3.0
5. Maryland	87.8	5.8	2.2
6. Illinois	83.1	4.8	2.4
7. N. Carolina	78.2	5.6	2.5
8. Georgia	73.3	5.2	2.9
9. <b>California</b>	<b>66.9</b>	<b>3.5</b>	<b>1.6</b>
10. Texas	49.7	4.2	2.1

Source: TVIS, reporting year 2008

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**Table 4 - Percent of Mothers who Breastfeed at 6 months  
in the 10 States with the *Most* African-American Births (2007)**

<b><u>STATE</u></b>	<b><u>% Breastfeed at 6 Mos</u></b>	<b><u>Post Neo-Natal MR</u></b>
<b>1. California</b>	<b>69</b>	<b>1.6</b>
<b>2. New York</b>	<b>50</b>	<b>1.8</b>
<b>3. Maryland</b>	<b>40</b>	<b>2.2</b>
<b>4. Florida</b>	<b>35</b>	<b>2.6</b>
<b>5. Texas</b>	<b>34</b>	<b>2.1</b>
<b>6. Georgia</b>	<b>30</b>	<b>2.9</b>
<b>7. Illinois</b>	<b>26</b>	<b>2.4</b>
<b>8. N. Carolina</b>	<b>16</b>	<b>2.5</b>
<b>9. Michigan</b>	<b>16</b>	<b>3.0</b>
<b>10. Louisiana</b>	<b>15</b>	<b>4.3</b>

source: TVIS, reporting year 2008

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## **CONCLUSIONS**

- New York's ***community-based regionalization*** model goes beyond designating hospitals to provide specialty care to high risk patients by promoting ***regional perinatal partnerships*** that effectively encourage medical facilities and community services providers to work together to improve birth outcomes.
- New York's neo-natal and post neo-natal infant mortality rates support the widely held view that New York's ***community-based regionalization*** model deserves much of the credit for the state's relatively strong performance in reducing infant mortality, especially among African-Americans.