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New York leaders in government and hospitals, Siegenthaler noted, also pushed in the past two years to re-prioritize maternal health, spanning from expansions of Medicaid coverage for doula and postpartum care to health equity surveys and investments.

Some recent measures, however, are expected to take at least a couple years before translating into mortality rate reductions, said Dr. Peter Bernstein, co-chair of the American College of Obstetricians and Gynecologists, or ACOG, Safe Motherhood Initiative in the New York region.

Changes to Medicaid — and new efforts to reduce cesarean deliveries among low-risk mothers and limit cardiac-related maternal deaths — could prove key to catching up with top-performing states, added Bernstein, who is also Mt. Sinai Health System's obstetrics' director.

California's nation-leading maternal mortality rate of about 10 deaths per 100,000 live births stemmed, in part, from using high-level data analysis to identify and better treat high-risk pregnancies, said Bernstein.

New York's efforts to reduce maternal mortality, he added, remain about three to four years behind the California model.

"Some of these are difficult patient populations to engage," Bernstein said, noting mental health issues have emerged as a top preventable cause driving maternal mortality.

"For someone who is sleep-deprived — or may have depression related to being postpartum — and has a crying newborn in the other room and may have a substance use disorder, it is really hard to take care of themselves," he said.

What is working to lower maternal mortality?

To explore this crucial issue, the USA TODAY Network interviewed top experts and analyzed a key report issued in March by the state maternal mortality review board, which was established by state law in 2019. These statistics — recorded in 2023 surveys — suggested widespread adoption of solutions highlighted in a 2019 USA TODAY Network investigation of preventable maternal deaths and injuries.

Among the maternal health solutions that are working and those that could be improved:

- Nearly 95% of hospitals in New York had implemented recommended safety bundles for massive blood transfusions — a form of check list that providers use to improve care. About 86% of hospitals used the evidence-based safety bundle standards for quantifying blood loss.

- In contrast, about 75% of hospitals in New York had implemented screening for venous thromboembolism and chemoprophylaxis, despite safety bundles being available to limit those risks.

At the same time, the state Health Department provides data analysis to help hospitals in New York identify, assess and reduce maternal health threats.

But that approach is less effective than the California model, which provides real-time data analysis through an online maternal data center affiliated with Stanford University.

While it remains unclear if New York could join other states in gaining access to California's data center, the service is pushing to add hospitals nationally through a membership fee.

What NY is doing about maternal health racism, discrimination

With the state review board revealing discrimination was a probable or definite circumstance surrounding about 47% of pregnancy-related deaths in New York, efforts to survey patients about racism and bias in medicine have also been crucial, experts said.

Some of the anti-bias efforts stemmed from the state Birth Equity Improvement Project launched in 2021, and Siegenthaler asserted health officials expect to soon release data showing positive gains in reducing race and ethnic disparities.

State officials also continued to work with hospitals to remove any barriers to implementing safety bundles, which are key to limiting health risks that disproportionately impact women of color, according to Siegenthaler.

Many hospitals have already begun training staff based on the equity survey findings, while pushing programs aimed at addressing social needs — such as transportation, housing and economic factors — driving disparities, said Dr. Camille Clare, a member of state and ACOG maternal health programs.

"This is how we connect our patients to resources in the community," said Clare, who works at SUNY Downstate Hospital in Brooklyn.



Vicky Deutsch of Vicky's Doula Services on a follow up visit with a client's newborn baby. PROVIDED BY VICKY DEUTSCH