

Mayor Adams Takes Action to Reduce Maternal and Infant Health Inequities by Expanding Access to Doulas and Midwives

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Video available at: <https://youtu.be/BqX5S9clAz8>

Doula and Midwifery Initiatives Part of City's Comprehensive Plan to Address Disparities in Maternal Deaths, Life-Threatening Complications From Childbirth, and Infant Mortality

Citywide Expansion of Doula Program Will Offer Doulas to 500 Families in Next Three Months

NEW YORK – New York City Mayor Eric Adams today took steps to reduce maternal and infant health inequities in New York City and provide critical resources to new families — announcing the citywide expansion of the doula program, the expansion of a Midwifery Initiative, and the expansion of a maternal health care services program. The Citywide Doula Initiative will provide free access to doulas for birthing families and focus on 33 neighborhoods with the greatest social needs. The Midwifery Initiative will be expanded to all 38 public and private birthing facilities citywide and will allow the New York City Department of Health and Mental Hygiene (DOHMH), for the first time, to gather data on births and care with midwives; create partnerships with midwife organizations, private practices, and community members; and develop a report on midwives in New York City. Finally, the Maternity Hospital Quality Improvement Network (MHQIN) will be expanded across all 38 birthing facilities across the city in an effort to improve maternal care at local hospitals and birthing centers.

“The root causes of racial disparities in maternal health are real, so it’s time we do right by every mother and every baby, no matter the color of their skin or the language they speak,” said **Mayor Adams**. “Today, we are announcing a multifaceted initiative to help reduce the inequities that have allowed children and mothers to die at the exact time when we should be welcoming a life. By expanding and investing in both doulas and midwives, we are taking the steps necessary to begin to address the disparities in maternal deaths, life-threatening complications from childbirth, and infant mortality.”

“Thank you to Mayor Adams for continuing to make maternal health a priority and to our practitioners in the field and partners at DOHMH,” said **Deputy Mayor for Health and Human Services Anne Williams-Isom**. “Our colleagues at DOHMH work hand-in-hand with our doula and midwife partners to offer thoughtful care for every expectant person and family, providing support every step along away. These expanded initiatives will strengthen supports for expectant people, advance expertise at DOHMH, and take tangible steps towards tackling health disparities.”

“Systemic racism should not be a New Yorker’s first experience upon coming into the world,” said **DOHMH Commissioner Dr. Ashwin Vasan**. “The voices of midwives and doulas must be included in the work we are doing to lower the glaring inequities in complications from childbirth. I thank Mayor Adams for taking action to improve birth equity in New York City.”

All three initiatives are part of Mayor Adams’ mission to reduce health inequities in New York City, particularly amongst marginalized Black and Latino/a families and pregnant people. They build on DOHMH’s existing “[By My Side Support Program](#)” and are a key part of the “[New Family Home Visits Program](#)”— a new, comprehensive \$30 million package of home-visiting services for first-time families.

Maternal and infant health inequities are rooted in generations of structural racism and disinvestment. In New York City, Black women are nine times more likely to die of a pregnancy-related cause than white women, and their rate of infant mortality is more than three times higher. For Puerto Ricans, the infant mortality rate is twice that of white New Yorkers.

Citywide Doula Initiative

The Citywide Doula Initiative will aim to train 50 doulas and reach 500 families by the end of June. Families who enroll in the program will receive doula support both at home

and in the clinical setting, with three prenatal home visits, support during labor and delivery, and four postpartum visits. Clients who give birth at home will receive the same number of visits. The program will include screening and referrals for family needs and stressors, such as food insecurity. The model of care will be consistent across the city, and uniform data will be collected for a rigorous evaluation of the doula services provided through this initiative.

Doulas provide physical and emotional support during pregnancy and childbirth, which helps lower the risk of complications during childbirth for the parent and the infant. Studies show that doulas can reduce preterm births and low birthweights, which are the leading causes of infant mortality. Rates of cesarean birth and medical pain management also improve with doula support.

The Citywide Doula Initiative will focus services in three main categories:

- Providing equitable care — Doulas will be provided to eligible residents of the [33 neighborhoods](#) identified by the Taskforce on Racial Inclusion and Equity (TRIE). Priority will be given to people who are income-eligible for Medicaid and/or are giving birth for the first time (or the first time in over 10 years), as well as those who have had a previous traumatic birth experience, have no other labor support, live in a shelter, are in foster care, or have a high-risk medical condition.
- Expanding the doula workforce — To increase capacity, DOHMH is aiming to train 50 community members as doulas by June 30 and provide additional opportunities for professional development. DOHMH will also help uncertified doulas become certified; about 70 uncertified doulas are expected to take advantage of this opportunity.
- Creating partnerships with hospitals — The initiative will strengthen DOHMH's work with hospitals through the MHQIN, which creates doula-friendly hospital policies and practices and increases provider referrals to doula services. Staff will also collaborate with community-based, governmental, and health care partners to advocate for system-level change.

The initiative will integrate community-based doula organizations that serve clients in TRIE neighborhoods around the city — bringing additional funding to expand their services, build the capacity of their doula workforces, and partner with hospitals. Seven vendors have been chosen to partner in this work:

- Community Health Center of Richmond will provide services in Staten Island,
- Hope and Healing Family Center will provide services in central and eastern Brooklyn,
- The Mothership will provide services in Harlem and northern Manhattan,
- Northern Manhattan Perinatal Partnership will provide services in Harlem, northern Manhattan, and the southwest Bronx, and
- Ancient Song Doula Services, Caribbean Women's Health Association, and the Mama Glow Foundation will provide services in the rest of the city.

Midwifery Initiative

The Midwifery Initiative builds on research about existing midwifery care models across pregnancy, birth, and the postpartum period. Midwives are clinicians who receive formal education, training, and licensure to provide a full range of highly personalized maternal and primary health care to meet their clients' unique physical, mental, emotional, and cultural needs. Studies have shown that midwives help lower rates of cesarean births and unnecessary interventions during childbirth, and pregnant people cared for by midwives are less likely to report disrespectful care.

The Midwifery Initiative includes:

- Convening a steering committee of stakeholders and key informants to recommend ways to better understand the quantitative and qualitative data about pregnancy care and birth outcomes in both hospital and home-based settings.
- Partnering with midwives conducting research at New York University to develop an assessment tool to measure successful integration of midwifery care models into maternal health care settings.
- Identifying models for enhancing and expanding midwifery training opportunities, including cross-training between midwives and medical doctors.

Maternity Hospital Quality Improvement Network

The MHQIN is a clinical and community initiative that seeks to reduce disparities in preventable maternal morbidity and mortality. Key strategies focus on the drivers of racial and ethnic disparities in maternal outcomes. The expansion of the program will invite 23 new birthing hospitals and centers, reaching all 38 birthing facilities in New York City.

The MHQIN includes:

- Increased surveillance of severe maternal morbidity data to improve health outcomes.
- Trainings for staff in racial equity, implicit bias, and trauma-informed care.
- Partnerships with community-based organizations and doula services.

“The COVID-19 pandemic has disproportionately plagued our most vulnerable communities throughout the five boroughs, shining a light on many inequities when it comes to health factors plaguing many neighborhoods throughout city,” said **U.S. Senator Kirsten Gillibrand**. “It’s painfully clear that we are not doing nearly enough to protect women of color and their babies, and we must do much more to end institutional racism in our health care system and ensure the resources are available to care for expecting and new mothers. The Citywide Doula Initiative and the Midwifery Initiative address the maternal and infant health needs of Black and Hispanic families, helping reduce health inequities in New York City, particularly amongst marginalized communities.”

“Having a child should be a cause for celebration of the gift of life, not a cause for concern for the lives of the mother and her infant,” said **U.S. Representative Yvette Clarke**. “Tragically, long-standing inequities in maternal and infant health have left far too many of our city’s expecting mothers apprehensive for their safety and the health of their babies. As long as these inequities exist, we must pursue every potential solution to solve them. I am deeply appreciative of Mayor Eric Adams’ new doula and midwifery initiatives, as they represent a crucial component of the compassionate leadership necessary to do just that. Through these programs, New York City’s most underserved mothers, especially Black and Latina women, will soon have access to long-overdue support systems to aid them through the tribulations of childbirth and the early days of their child’s life. Not only will lives be changed, but lives will be saved, and I am eternally grateful to Mayor Adams for his commitment towards making that so.”

“For me, advancing Black maternal health is more than just a policy initiative, it’s personal,” said **New York Assemblymember Rodneyse Bichotte Hermelyn**. “The loss of my son Jonah in 2016 was a heartbreak that has never been healed. The cause was a common and preventable preterm labor condition. The Adams administration’s doula and midwifery initiatives take a critical leap towards narrowing the racial and socioeconomic gaps that have long perpetuated a sense of fear, and prevented new families from experiencing joy when they’re expecting. I encourage all expecting parents

in my district, and all 33 neighborhoods this program will pilot in, to sign up to access doula and midwifery care. The difference could mean life or death.”

“As a longtime advocate for midwifery care, I am delighted to see New York City take these steps to integrate midwives and doulas into the perinatal care system,” said **New York Assemblymember Richard Gottfried, chair, Health Committee**. “Midwives and doulas provide the highly personalized care that many low-income New Yorkers, especially people of color, have lacked for far too long. Last year, Governor Hochul signed a bill by Senator Rivera and me to facilitate the creation of midwife-led birth centers, and I hope this will lead to rapid expansion in New York City and statewide.”

“Maternal health care inequities, particularly for Black and Brown women, have been a key focus for my office — until recently, I never realized how significant it would be to me and my family,” said **New York City Public Advocate Jumaane Williams**. “Birth equity is a social justice issue, and today’s announcement will help bring care to communities too often underserved, and lower the economic barriers that have prevented some pregnant people from seeking this care. This initiative will also strengthen the ties between hospitals and community-based organizations meeting people where they are. I thank the administration for making this issue a priority. Together with my legislative package, these programs will help to change the unjust systems that have long denied women of color in our city the care they need and deserve.”

“Uprooting the deeply entrenched maternal and infant health disparities that inflict exponentially higher mortality rates on Black and Latina women and children is essential to addressing a long legacy of health inequities,” said **New York City Council Speaker Adrienne Adams**. “Investments in these initiatives that provide free access to key services and other supports, while expanding community-based infrastructure and coordination to ensure their success, are an important step towards repairing the impacts of intergenerational disinvestment in the health of our families and communities. I look forward to seeing the impact of this plan as we work to rebuild a safer, healthier, and more equitable city.”

“When we stand together against an issue, pour resources on its solutions, and advocate for more awareness the needle will move in a positive direction almost instantly,” said **Brooklyn Borough President Antonio Reynoso**. “The perfect example of this is the energy local community groups, hospitals, myself, and fellow elected

officials have displayed to reduce the crisis-level maternal mortality rates in our city. Thank you, Mayor Adams, for taking up this fight with us and pushing for critical services like doula and midwifery programs.”

“I am glad that Mayor Adams has taken this positive step that will help address the glaring inequities in maternal health outcomes,” said **New York City Councilmember Mercedes Narcisse**. “Studies have shown that doulas improve birth experiences and play a critical role in combating discrimination and racism that Black and Brown mothers who give birth frequently report experiencing. It is unconscionable that maternal death rates differ so drastically by race, and this is a major step in the right direction.”

“The coronavirus pandemic exacerbated the need for a range of options for pregnant women,” said **New York City Councilmember Lynn Schulman**. “Projects such as the doula and midwifery initiatives have kept pregnant women safe and reduced the burden on already-overwhelmed hospital systems. Doulas and midwives have also been associated with improved maternal health outcomes and lower rates of medical intervention during birth. Expanding the role of these two crucial initiatives is essential to recovering from COVID and addressing the inequities that already existed in maternal health, especially in communities of color.”

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