



Resolving Inequalities in Black Maternal Health in New Jersey

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New Jersey, despite being one of the wealthiest states in the country, has one of the highest maternal mortality rates in the country. This raises concerns about the quality of treatment provided to pregnant mothers. The Doula Access Bill has been implemented to address this issue, but more is needed. The expansion of the maternal workforce is crucial to addressing the escalating obstacles faced by expectant mothers and just-turned parents. The current labor force is inadequate to address the escalating challenges faced by expectant mothers. Enhancing the workforce of proficient healthcare practitioners, including obstetricians, midwives, and nurses, can mitigate inequities and ensure that every pregnant woman receives impartial and high-quality medical services. Additionally, expanding the number of trained healthcare practitioners, including OBGYNs, midwives, nurses, and doulas, can guarantee that pregnant women receive the necessary care throughout their pregnancy and delivery. Expanding the maternal workforce will benefit not only the quality of treatment but also the broader healthcare system in New Jersey, allowing practitioners to provide prompt treatments, reduce complications and fatalities, and meet the different requirements of pregnant women, especially those from underserved areas.

Black women in the United States face significant disparities in maternal health outcomes, with higher rates of mortality and morbidity compared to their white counterparts. These disparities are rooted in systemic racism, implicit bias, and socioeconomic factors that contribute to unequal access to quality healthcare and discriminatory treatment within the healthcare system. Black women often experience inadequate prenatal care, higher medical interventions, and a lack of culturally competent care, leading to adverse outcomes during pregnancy and childbirth. New Jersey has seen a surge in maternal deaths among black women, surpassing all other racial groups over the past two decades. This trend is reflected across various ethnicities, with mortality rates climbing by 102% for black and Native American women, 95% for white women, 66% for Hispanics, and 39% for Asians.

Improving maternal health requires a comprehensive approach that addresses health before, during, and after pregnancy and involves various stakeholders. Everyone can help improve maternal health by promoting healthy behaviors and addressing factors contributing to health disparities. Healthcare professionals can play a crucial role by ensuring quality preventive healthcare, managing chronic conditions, communicating effectively with women and their families, recognizing early warning signs, and providing postpartum care.

The Nurture NJ Strategic Plan, which launched in 2018, aims to address and eliminate these disparities by focusing on improving the health and well-being of Black mothers and infants in New Jersey. This comprehensive plan includes initiatives such as increasing access to quality prenatal and postpartum care, expanding the use of doulas and midwives, and promoting cultural competency and diversity training for healthcare providers. It also recognizes the importance of addressing social determinants of health, such as poverty and discrimination, that contribute to the disproportionate burden of maternal mortality and morbidity among Black women. By prioritizing the needs of Black mothers and infants and implementing evidence-based strategies, the Nurture NJ Strategic Plan is taking a crucial step towards addressing racism in Black maternal health care and promoting health equity for all.

Maternal mortality among Black women is a significant issue, with thousands dying within the hands of healthcare professionals. Black women live predominantly in Black census tracts, with 85% of them living in areas where a sixth or more of the population is also Black. The state must work together with the public to combat the nationwide crisis of maternal mortality among Black mothers. The legislature can provide more funding for doula training programs to increase the number of doulas of color in the state, providing more job opportunities and culturally competent support. Addressing social determinants of health, such as access to quality healthcare, education, housing, and employment opportunities, can create a more equitable environment for Black mothers and their families.

Since Governor Murphy's term began six years ago, efforts have been made to enhance doula services and programs, highlighting midwifery and community doula care benefits and encouraging hospitals to implement system-wide changes. To augment and diversify the maternal health workforce, resources should be allocated towards comprehensive training and education initiatives, addressing systemic obstacles, expanding affordable healthcare access, and promoting partnerships among community-based programs, healthcare organizations, and government agencies.

Overall, to address the disparities in Black maternal health, policymakers should develop a comprehensive strategy that goes beyond the existing Doula Access Bill, including bias training, financial support for community health initiatives, and forming alliances with maternal health organizations.

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