

DAILY NEWS

Programs fight to cut infant death rate

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Expectant mothers in Mott Haven have about the same chance of delivering a healthy baby as mothers in Russia and Uruguay.

While New York City has reduced its citywide infant mortality rate to six deaths per thousand live births, the rate in that South Bronx neighborhood almost doubled from 2005 to 2006, increasing from 5.8 to 11.4 per thousand.

City Department of Health and Mental Hygiene officials caution that the year-to-year increases are difficult to analyze because the numbers are relatively small. Three-year averages are a better reflection, the department said. When considered that way, the Mott Haven rate is 7.2 deaths per thousand births, still much higher than city and national averages.

"Unfortunately, we've consistently been seeing high rates in the same neighborhoods. Certainly, Mott Haven is one of them, and Brownsville and Bedford-Stuyvesant [in Brooklyn] are two others where we see high rates," said Lindsay Senter, a researcher who analyzed the most recent data for the department. "We see the highest rates of infant mortality in areas where there is high poverty."

Public health experts have long recognized correlations between poverty and race and infant mortality. Most of the babies that die before the age of 1 are premature or born with very low birthweights. In Mott Haven about 75% of the infants who died were extremely premature.

"The common theme of the neighborhoods that have rates over 10 is the degree of poverty they have," said Dr. Hal Strelnick, professor of family and social medicine at Albert Einstein College of Medicine in the Bronx. "Poverty and all that goes with it — poor nutrition, more young women getting pregnant, smoking — all those things are clustered around poverty in those communities."

Lisa White, director of the Healthy Families program at Bronx-Lebanon Hospital, knows what she's up against. Program workers try to reach women during their pregnancies and then make home visits until the child is up to 5 years old.

After Mario Drummonds, head of the Northern Manhattan Perinatal Partnership, and colleagues from around the city launched a coalition to push for more funding a few years ago, the city and state set aside tax dollars to pay for community outreach, public health campaigns and new programs such as the Nurse-Family Partnership, which brings nurses into the homes of low-income, first-time mothers.

Most agree that that program and similar ones, like the Healthy Families program funded by the state, can improve children's chances of survival and keep them out of foster care.

But some would like city funding spread more evenly between community-based organizations and city-run programs. "I think it's a good intervention, but what's occurred is Health Commissioner Dr. [Thomas] Frieden and Mayor Bloomberg are arguing that it's the only game in town," Drummonds said of the Nurse-Family Partnership.

White has seen Morrisania's West African population explode over the past few years, and wants her staff to reflect that. "I have a worker who speaks Soninke, Fulani, French and Wolof," she said, referring to dialects from Gambia and Senegal.

White said the Healthy Families program has helped reduce premature births and low birthweights.

Cost-benefit analyses have shown that every dollar spent on prenatal care saves \$4 in later medical costs for premature and low-birthweight infants.

And equally important is supporting parents after they've had a child, said White, in order to prevent child abuse and neglect.

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"Parenting is the hardest job people will ever have," she said. "In its being so difficult, it is nice to have someone who can support us."