Rationale for the Development of a Maternal, Infant, and Child Health Program in Newark, New Jersey by Simone Fletcher

Rationale Outline

1. A Global Perspective:

 Maternal and child health is still a critical global health concern annually. According to the World Health Organization (WHO), approximately 290,000 women die each year from pregnancy-related causes. A report shows that over 4.5 million women and babies die every year during pregnancy, childbirth or the first weeks after birth, equivalent to 1 death happening every 7 seconds and mostly from preventable or treatable causes if proper care was available.1

2. A National Perspective:

 The United States has seen a significant increase in maternal mortality rates over the past two decades. The Centers for Disease Control and Prevention (CDC) reports a maternal mortality rate of approximately 32.9 deaths per 100,000 live births, with minority women, particularly Black women, facing disproportionately higher rates.2

3. A State Perspective (New Jersey):

New Jersey has one of the highest maternal mortality rates nationally, recorded at 25.7 deaths per 100,000 live births (New Jersey Department of Health). The state has found disparities affecting Black and Hispanic women significantly with the pregnancy-related mortality ratio for Black non-Hispanic women was almost 7 times that of non-Hispanic White women from 2016-2018, much higher than the national average. 3

4. A County Perspective (Essex County):

In Essex County, the infant mortality rate stands at approximately 8.4 deaths per 1,000 live births, markedly higher than the national average of 5.6.4 Minority populations, particularly Black infants, experience even greater rates of infant mortality.

5. A City Perspective (Newark):

Newark has a diverse population, with approximately 47% Black and 37% Hispanic residents (U.S. Census Bureau).5 Health indicators reveal that these populations suffer from higher rates of maternal and infant mortality, inadequate prenatal care, and increased instances of low birth weight.

6. Narrowing Down to the Priority Population:

The focus of this program will be on minority women of childbearing age (15-49 years) and their infants in Newark. These demographic faces systemic barriers to healthcare access, including economic challenges, lack of health education and limited access to quality healthcare facilities.

7. Problem Statement:

The elevated rates of maternal and infant mortality, especially among minority populations in Newark, represent a significant public health crisis. The combination of limited access to quality prenatal and postnatal care and socioeconomic disparities requires urgent intervention.

8. Proposed Solution:

A comprehensive Maternal, Infant, and Child Health Program is suggested, focusing on accessible prenatal and postnatal care, health education, and resource provision for minority families in Newark.

9. Program Overview:

The proposed program will include:

Outreach and Education: Workshops on maternal health, nutrition, and infant care.

Healthcare Access: Collaboration with local clinics to provide free or low-cost prenatal and postnatal services.

Support Services: Home visits by nurses and community health workers to help and mentor new mothers and infants.

10. Benefits to Decision-Makers:

Improved health outcomes for mothers and infants can lead to reduced healthcare costs and reduce existing disparities. This program can enhance community trust in health systems and improve overall public health indicators in Newark.

11. Program Partners:

Potential partners may include local health departments, community health organizations, hospitals, and academic institutions, all of which have a personal stake in improving health outcomes and addressing health disparities.

12. Reason for Program Success:

Success will be enabled by community involvement, building on existing partnerships with healthcare providers, and using evidence-based practices that have proven effective in similar circumstances. My rationale emphasizes the urgent need for a focused program on Maternal, Infant, and Child Health in Newark, NJ, particularly for its minority populations. By addressing healthcare access, providing education and resources to this population, we can work towards reducing disparities and improving health outcomes for mothers and their children in Newark NJ.

13. References:

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3. McCue M. Maternal Health Equity in New Jersey. New Jersey State Policy Lab. Published 2023. <https://policylab.rutgers.edu/maternal-health-equity-in-new-jersey/>

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5. U.S. Census Bureau QuickFacts: Newark city, New Jersey. www.census.gov. <https://www.census.gov/quickfacts/fact/table/newarkcitynewjersey/PST045219>