

STATE OF NEW JERSEY

GOVERNOR PHIL MURPHY

DOH ANNOUNCES \$4.3 MILLION TO REDUCE DISPARITIES IN BIRTH OUTCOMES AND BLACK INFANT MORTALITY

From the New Jersey Department of Health:

Trenton - The Department of Health (DOH) today announced that it will award \$4.3 million in grant funding as part of intensified efforts to decrease disparities in birth outcomes and reduce black infant mortality.

"All of New Jersey's expectant mothers should be able to bring children into the world without fear," said First Lady Tammy Snyder Murphy. "As a mother, I find it shameful that race persists as a factor in maternal health and infant mortality rates in our state. We can and must do better to make sure that mothers are not an afterthought and to ensure their health before, during, and after childbirth."

Although the overall infant mortality rate in New Jersey is lower than the national rate (4.7 per 1,000 live births versus 5.9 per 1,000 live births in 2015), the disparity between white (3.0 per 1,000 births) and black infants (9.7 per 1,000 births) is extreme. The infant mortality rate for black infants is more than three times that of white infants.

"Improving maternal and infant health and reducing black infant mortality is a top priority of the Department of Health and the Murphy administration," said Commissioner Dr. Shereef Elnahal. "We want to try a different approach because key maternal and child health indicators have not improved over decades in the state, and significant racial and ethnic disparities persist."

"The disparities in New Jersey around infant mortality are shamefully high," said Dr. Elnahal. "We need community partners across the state focused on these efforts to combat the documented lifetime cultural and racial stressors in communities of color that are negatively affecting maternal health and infant outcomes."

The "Healthy Women, Healthy Families initiative," will provide funding to community-based programs to target activities in high need areas where the impact will be most significant, particularly in areas with significant health disparities. Up to 12 grantees will be funded statewide. Grantees will be expected to target counties and/or the following high-need municipalities: Atlantic City, Camden, Trenton, East Orange, Irvington, Jersey City, Newark and Paterson.

Grantees will be evaluated on several measures with the longterm goals of increasing the percentage of healthy births and reducing black infant mortality.

The community programs will use a two-pronged approach: 1) county-level activities that focus on providing high-risk families and women of child-bearing age access to information and referrals to community services that promote child and family wellness and 2) municipality-level activities that will focus on black women of child-bearing age and linking them to community supports, implementing specific black infant mortality programs, and providing education and outreach to health providers, social service providers and other community level stakeholders.

High-risk women include those with low-income and/or uninsured, women with chronic health conditions, women with multiple social or economic stressors, victims of domestic violence, individuals impacted by mental health issues, alcoholism and substance abuse, women with minimal social supports and women with unintended pregnancies. These women on average attend fewer prenatal visits and are more likely to experience adverse pregnancy outcomes. Their families are less likely to access consistent, comprehensive preventive and primary care services, and are less likely receive quality care.

For more information on the grant visit:

https://healthapps.state.nj.us/noticeofgrant/documents/DFHS19OTR_rfa.pdf

(https://urldefense.proofpoint.com/v2/url?u=https-3A__t.e2ma.net_click_vlq9t_nrddit_3ze47e&d=DwMFaQ&c=4BTEw-1msHjOY4ITcFLmDM6JB8x6ZgbU2J24IH0HZLU&r=xF3DPDNEH8rwpTwktOjb4MHQ0EgF6v3M0zt3hszQvyU&m=

Applications are due by May 18 and the programs will begin July 1.



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