

Introduction

Racial disparities compound the geographic disparities in NYC maternal mortality

NYS ranks 30th in maternal mortality¹

- In NYC, Black women are 12x more likely to die from pregnancy related causes than white women²
- Partly driven by 45% decrease in white maternal mortality²

The CHW model has shown improved outcomes in many low and middle income countries

- Build off context based lived experiences
- Support & advocate for women as they seek out appropriate pregnancy care

Currently a paucity of NYC CHW programs for maternal health³

Community based interventions & the CHW model have shown success

Saving Mothers and Northern Manhattan Perinatal Partnership

- Saving Mothers has developed and evaluated training programs for CHWs globally
- NMPP employs CHWs in NYC
- SM & NMPP partnered to optimize the CHW maternal health training in NYC

Thank you to Saving Mothers, Northern Manhattan Perinatal Partnership, and NYU for their support.

Methods

Purpose:

- Assess, optimize and standardize CHW maternal health training
- Improve CHW medical knowledge and health literacy, communication, and advocacy strategies

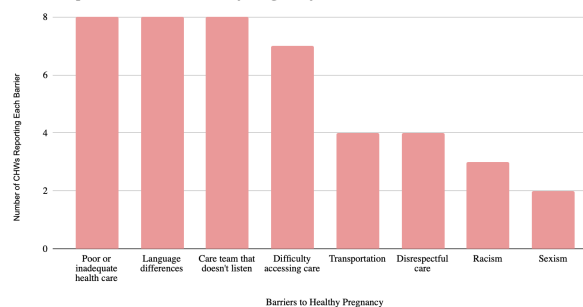
Needs Assessment

- 11 CHWs from NMPP completed a 29-item survey
- ✓ Demographics
- ✓ Barriers to healthy pregnancy
- ✓ CHW roles, training and preparedness
- ✓ Job perceptions and satisfaction

Survey developed based on results of preliminary ethnographic work

Results

CHW Reported Barriers to Healthy Pregnancy



Most Frequent CHW Roles and Activities

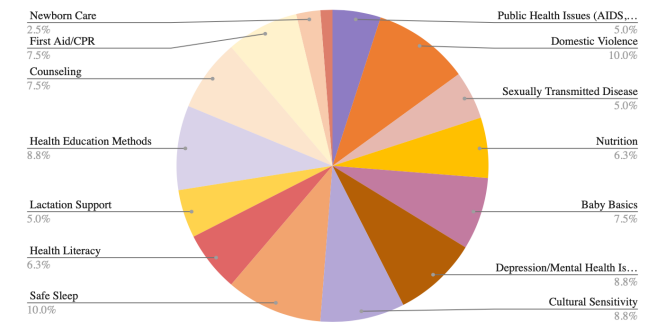
- Conducting health assessments
- Refer/assist getting to social services
- Informal counseling, coaching, support
- Use or give print information to client

Job Perception & Satisfaction

- CHWs address above barriers, "very much"
- "Forefront" of client needs
- High job satisfaction

Results

% of CHWs who received training on the following topics during CHW training



CHW Training

- Inconsistent and non-standardized CHW training
- Reported low confidence in recognizing health risks and communicating information to low health literacy clients

Conclusions

- The current state CHW training in NYC is non-standardized
- Future training for CHWs in maternal health should focus on **identifying pregnancy risks, health literacy, communication strategies and self-advocacy** in order to optimize the impact of CHWs in NYC and further address racial disparities in maternal morbidity and mortality

References:

1. New York State task Force on Maternal Mortality and Disparate Racial Outcomes: Recommendations to the Governor to Reduce Maternal Mortality and Racial Disparities. March 2019.
2. NYC Department of Health and Mental Hygiene. Pregnancy Associated Mortality: New York City 2006-2010.
3. Perry, H. B., Zulliger, R., & Rogers, M. M. (2014). Community health workers in low-, middle-, and high-income countries: an overview of their history, recent evolution, and current effectiveness. *Annual review of public health*, 35, 399-421.