

# Listen: For Long Island mothers, community efforts address ‘an injustice made purposefully invisible’

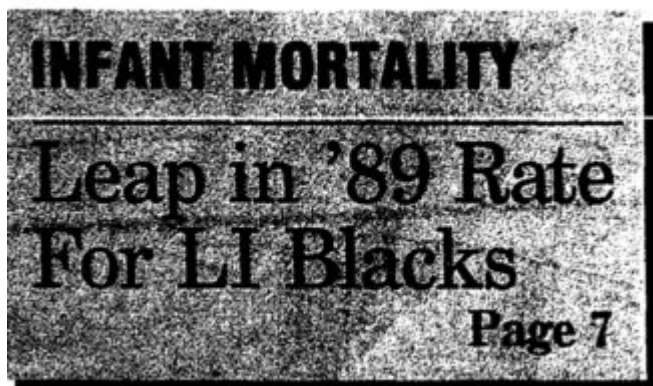


By [Nicholas St. Fleur](#) June 5, 2023



In the third episode of “Color Code,” we take a look at efforts on Long Island to address racial disparities in maternal and infant mortality. In the U.S., Black women are three times more likely than white women to die as a result of childbirth. Black babies also have an infant mortality rate that is twice as high as it is for white babies.

**Leap in '89 Rate For LI Blacks: Black Infants on LI at Risk**  
Kath Gray STAFF WRITER  
*Newsday (1940-1991)*; Mar 29, 1991; ProQuest Historical Newspapers: Newsday  
pg. 1



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Headlines about Black infant mortality rates on Long Island collected by Martine Hackett from the local newspaper Newsday. *Courtesy Martine Hackett*

We hear again from Martine Hackett, a suburban public health expert at Hofstra University on Long Island. She tells us about why she founded Birth Justice Warriors, which works to reduce maternal and infant mortality on Long Island. She views infant mortality as a sort of canary in the coal mine that indicates the overall health of a community. On Long Island, the infant mortality rate for white babies is about 2 deaths per 1,000 live births. However, for Black babies, the rate is much higher, at about 8 to 9 deaths per 1,000 live births.

# Black **Infants** on LI at Risk

Latest figures on death rate show big increase; prenatal care cited

By Katti Gray  
STAFF WRITER

The death rate for black infants on Long Island jumped dramatically between 1988 and 1989 — rising from 17.9 to 25.3 per 1,000 babies in Suffolk County, and from 23.3 to 26.6 in Nassau.

Health care experts say the change can be linked mostly to a lack of prenatal care and to increasing drug abuse — specifically, the use of crack. Part of the reason for inadequate prenatal care, they said, can be attributed to a faltering economy that has meant a lack of public funds for government prenatal projects, and a lack of personal funds for private health insurance.

They also said infant mortality is a complex issue largely tied to pregnancy among teens, drug addicts, immigrants and poor women who won't, or can't afford to, care for themselves or their children properly.

"Many of them never make it into the [prenatal-care] system. We don't know what their nutrition is in the home. We don't know their living conditions. There's a big problem with crack. How do I put it in words? It has taken a whole population by storm," said Dr. Deborah DuPrey-Murphy, a private obstetrician in Islip who also works at two public health clinics in Amityville and Brentwood where women are waiting up to three months for an appointment.

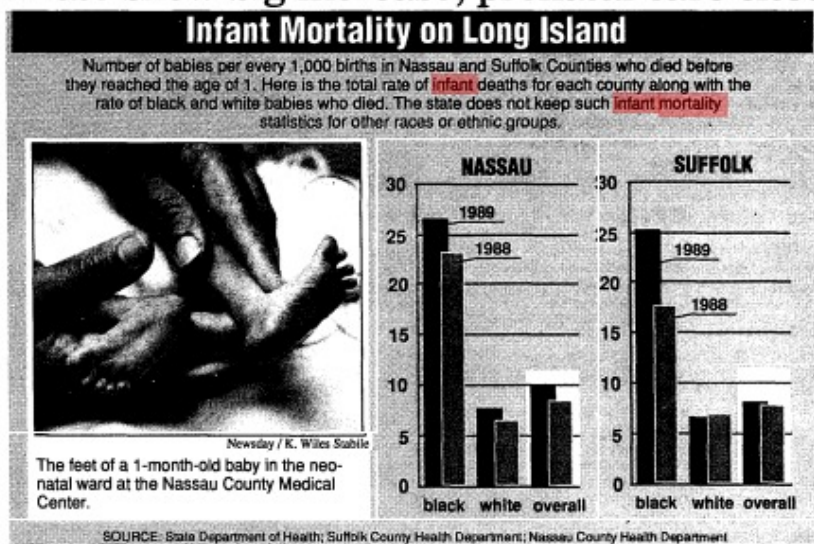
State and county officials still are compiling data for 1990, but 1989 figures for black and white infants 1 year old and younger in Nassau shows 10.2 deaths per 1,000 compared with 8.7 in 1988 and 10.2 in 1987. Suffolk's figures were 8.1 for 1989, 8 for 1988 and 7.8 per 1,000 for 1987.

A racial breakdown showed black infants in Suffolk County dying at a rate of 25.3 per 1,000 in 1989 and whites at 6.6 per 1,000. In Nassau, the respective figures were 26.6 and 7.8 for 1989. In 1988, the Suffolk numbers were 17.9 and 7.1 and Nassau's were 23.3 and 6.6 per 1,000.

Dr. Mary Hibberd-Brandt, Suffolk County Health Department reproductive-services director, said it's hard to determine why the rates fell between 1987 and 1988 and rose again in 1989. Hibberd-Brandt leads a state-funded, Suffolk panel that in August expects to present its yearlong study of each infant death in the county. It will be the blueprint for a strategy aimed at addressing infant mortality.

Nassau County Health Department workers directed all questions to spokeswoman Shelly Feuer-Domash, who was unavailable for comment.

Directors of several private and government agencies that serve or track pregnant women blame some of the deaths on birth defects and other seemingly



unpreventable causes. But they say most of the 351 babies that died within a year on the Island in 1989 — of roughly 38,000 live births — were born weighing 5.5 pounds or less, which put them at a developmental disadvantage. All of them died before reaching their first birthday.

Faith Schottenfeld, a spokeswoman for the New York State Health Department in Albany, said her agency in January, 1990, loosened eligibility requirements for the state-run Prenatal Care Assistance Program (PCAP). That year, it served 63,740 of the estimated 123,000 eligible enrollees who range from welfare clients receiving Medicaid benefits to women who neither qualify for Medicaid nor have private insurance. Schottenfeld said 11,000 of the women were newly enrolled.

"There's a perception out there that government is this big welfare department in the sky. The reality is we're running out of resources," said Marcia Spector, executive director of the nonprofit Suffolk Network

on Adolescent Pregnancy in Bay Shore. "Mostly, these are the women least likely to make it on their own. They've no savvy, no street smarts, no money."

Spector also sits on Hibberd-Brandt's panel. She says insufficient state funding is one factor in the mortality issue.

Others include the increasing refusal of some obstetricians to treat welfare clients and the declining number of Long Island obstetricians. As the doctors move their practices to more affordable regions, Spector said many would-be patients are heading to financially strapped, overburdened public-health facilities.

"Twenty-two industrialized nations do better in protecting the lives of infants. Even if they are deficient in technology and money, they have a better batting average," said Susan Gordon, community-services director for the Long Island March of Dimes in Woodbury, which funds prenatal care for everyone from poor teenagers to middle-class women.

Nicholas Goldberg contributed to this story.

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Martine Hackett studied headlines in Newsday to better understand the historical disparities between Black and white infant deaths on Long Island. *Courtesy Martine Hackett*

We also speak with Jose Seng, a community health worker with Harmony Healthcare, a network of local health centers across Long Island. The organization recently received a nearly \$4 million grant to provide care and services to pregnant people in parts of Nassau County that have higher rates of maternal mortality. We join him as he provides help and resources to a client, Marcia, who recently gave birth and is navigating the challenges of new motherhood.

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other Monday.

*A transcript of this episode is available [here](#).*

To read more on some of the topics discussed in this episode:

- Maternal Deaths Rose Dramatically During Pandemic, CDC Study Shows, [U.S. News](#)
- Newsday op-ed by Martine Hackett on maternal and infant mortality: [Vestiges of racism still linger](#)
- Martine Hackett's [Birth Justice Warriors](#)
- Nassau nonprofit to use \$3.9M grant to target maternal mortality, [Newsday](#)
- Report cites stubborn gaps between races in health care outcomes, [Newsday](#)
- Task force's mission: Reduce black infant and maternal mortality rates, [Newsday](#)
- Maternity care 'deserts' on the rise across the U.S., report finds, [STAT](#)
- The Perinatal and Infant Community Health Collaboratives ([PICHC](#)) [Initiative](#)
- The New York state Maternal and Infant Community Health Collaborative ([MICHC](#)) [Initiative](#)

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## About the Author



### [Nicholas St. Fleur](#)

General Assignment Reporter, Associate Editorial Director of Events

Nicholas St. Fleur covers the intersection of race, medicine, and the life sciences.

[nicholas.stfleur@statnews.com](mailto:nicholas.stfleur@statnews.com)  
[@SciFleur](#)