

University of Massachusetts Boston

ScholarWorks at UMass Boston

Publications from the Center for Women in
Politics and Public Policy

Center for Women in Politics & Public Policy

9-2010

Women's Health Disparities and Midwifery Care: Spotlight on Massachusetts

Dorothy Hiersteiner

University of Massachusetts Boston

Follow this and additional works at: https://scholarworks.umb.edu/cwppp_pubs



Part of the [Health Policy Commons](#), [Nursing Midwifery Commons](#), and the [Women's Studies Commons](#)

Recommended Citation

Hiersteiner, Dorothy, "Women's Health Disparities and Midwifery Care: Spotlight on Massachusetts" (2010). *Publications from the Center for Women in Politics and Public Policy*. 47.
https://scholarworks.umb.edu/cwppp_pubs/47

This Fact Sheet is brought to you for free and open access by the Center for Women in Politics & Public Policy at ScholarWorks at UMass Boston. It has been accepted for inclusion in Publications from the Center for Women in Politics and Public Policy by an authorized administrator of ScholarWorks at UMass Boston. For more information, please contact scholarworks@umb.edu.



Fact Sheet

CENTER FOR WOMEN IN POLITICS AND PUBLIC POLICY

September 2010



Women's Health Disparities and Midwifery Care Spotlight on Massachusetts

Authored by Dorothy Hiersteiner, Research Assistant, Center for Women in Politics & Public Policy, and MPP Candidate, Heller School for Social Policy and Management, Brandeis University

Snapshot

As a result of Massachusetts' 2006 health insurance coverage law, there has been a significant decrease in the uninsurance rate for women of color. Access to and use of health care for all women in the Commonwealth has also increased. Despite these coverage and access gains, major racial/ethnic disparities in health conditions and outcomes still exist among women, especially in the use and quality of prenatal care, the occurrence of preterm and low birth weight births, and infant mortality rates. The proportion of Massachusetts births that were cesarean deliveries in 2007 was 8% higher than the national rate.¹ Compared to other women in the country, Massachusetts women have particularly high rates of AIDS, lung cancer, and breast cancer.² In addition, there are critical shortages of primary care physicians and Ob-Gyns in several regions of the state. In 2005, 14.6% of the total Massachusetts population was foreign born.³ The racial/ethnic breakdown of Massachusetts residents is: 6% African American/black, 8% Hispanic, 5% Asian, 0.2% American Indian and 80% non-Hispanic white.⁴ Nearly 17% (16.9%) of women aged 19-64 are covered by Medicaid⁵

Reproductive, Maternal, and Infant Health

Prenatal Care

There are persistent racial/ethnic discrepancies in the use and quality of prenatal care. In 2008, 76% of Hispanic and 76.5% of black mothers received adequate prenatal care, compared with 84.6% of white mothers.⁶

Low Birth Weight

In 2008, black infants continued to have the highest percentage of low birth weight births at 11%. Among maternal

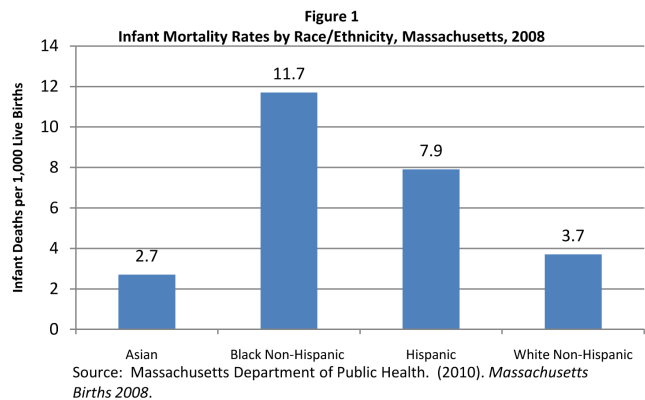
ancestry groups, African American (12.9%), Haitian (11.4%), Cambodian (10.9%), Cape Verdean (10.9%), Asian Indian (10.8%), and Puerto Rican (10.2%) mothers had higher rates than the state overall (7.8%).⁷

Cesarean Birth

In 2008, non-Hispanic white women and African American/black women had higher rates of cesarean birth (35.5% and 35.4% respectively) than Hispanic and Asian women (29.3% and 31.6% respectively).⁸

Infant Mortality

As Figure 1 demonstrates, 2008 data show significant racial and ethnic disparities in infant mortality. Non-Hispanic black infants were three times more likely to die before their first birthday than non-Hispanic white infants.⁹



Health Insurance, Access and Providers

Massachusetts' universal coverage law has minimized the disparities in health care coverage that previously existed among females of different income levels. It has also increased the percentage of Massachusetts women with usual sources of health care. In 2009, 93% of women had a place they usually went when they were sick or needed advice about their health, up from 90% in 2006.¹⁰

Funding for this activity was made possible in part by DHHS, Office on Women's Health. The views expressed in written materials or publications and by speakers and moderators at HHS sponsored conferences do not necessarily reflect the official policies of the Department of Health and Human Services; nor does the mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.

Yet several regions of Massachusetts, especially those in the central and western parts of the state, are facing critical shortages of primary care providers (PCPs), limiting access to care for many Massachusetts residents. Just over 5% of the population lives in federally designated medically underserved areas.¹¹

Paralleling the shortages of PCPs in parts of Massachusetts, residents' access to Ob-Gyn care is limited by physician shortages in several regions of the Commonwealth. In 2009, the average wait time to make an appointment or a routine "well-woman" gynecological exam with an Ob-Gyn in Boston was 70 days.¹²

Midwifery Care

According to 2008 data, there are approximately 453 Certified Nurse-Midwives (CNMs) and 342 nurse-midwifery practice sites in Massachusetts. In 2004, CNMs attended 10,434 births or 19.3% of all births in Massachusetts. Nurse-midwifery practice in Massachusetts is regulated by the Board of Registration in Nursing under the Nurse Practice Act. CNMs have prescription writing authority and mandatory third-party reimbursement for their services.¹³ In Massachusetts, Direct-Entry Midwives are legal by judicial interpretation or statutory inference.¹⁴ Legislation to remove supervisory language for CNMs and for standardization of Certified Professional Midwife (CPM) licensure is expected to be considered in the 2011-12 legislative session.¹⁵

Selected Resources, Programs and Initiatives

Birth Sisters Program

Located at Boston Medical Center, the Birth Sisters Program is an innovative multi-cultural doula service that offers women "sister-like" support during pregnancy, childbirth and the postpartum period.

www.bmc.org/obgyn/services/birthsisters.htm

Boston Association for Childbirth Education (BACE)

Founded in 1953, BACE is comprised of parents and professionals whose goal is to provide childbirth and breastfeeding education for families and those who support them.

www.bace-nmc.org/index.htm

Boston Healthy Start Initiative (BHSI)

This federally funded program aims to eliminate disparities in perinatal health by ensuring that black pregnant women receive quality health care by funding case management, health education, interconceptional care, and maternal depression services.

www.bphc.org/programs/cafh/mch/bhsi

Healthy Baby/Healthy Child Program (HBHC)

This community-based program is designed to promote infant survival, positive birth outcomes, oral health, and family unity.

www.bphc.org/programs/cafh/mch/hbhc

Women's Health Policy and Advocacy Program, Mary Horrigan Connors Center for Women's Health and Gender Biology

A core component of the Connors Center for Women's Health and Gender Biology, this program's mission is to inform and advance policy at all levels – local, state and national – to promote the highest standard of health and health care for all women.

www.brighamandwomens.org/ConnorsCenter

References

- 1 Massachusetts Department of Public Health. (2010, April). Health of Massachusetts. Retrieved August 27, 2010, from http://www.mass.gov/Eeohhs2/docs/dph/commissioner/health_mass.pdf.
- 2 Caiazza, A. (2002). The status of women in Massachusetts. Retrieved September 6, 2010, from Institute for Women's Policy Research Web site: <http://www.iwpr.org/states2002/fullreports/MA.pdf>.
- 3 Pew Hispanic Center. (2006, October). A statistical portrait of the foreign-born population at mid-decade: Foreign born by state. Retrieved August 26, 2010 from <http://pewhispanic.org/files/other/foreignborn/Table-8.pdf>.
- 4 Massachusetts Department of Public Health. (2010, April). Health of Massachusetts. Retrieved August 27, 2010, from http://www.mass.gov/Eeohhs2/docs/dph/commissioner/health_mass.pdf.
- 5 The Kaiser Family Foundation. (2008). Massachusetts: Health insurance status by gender. In [statehealthfacts.org](http://www.statehealthfacts.org/profil-eind.jsp?cat=3&sub=178&rgn=23). Retrieved August 28, 2010, from <http://www.statehealthfacts.org/profil-eind.jsp?cat=3&sub=178&rgn=23>.
- 6 Massachusetts Department of Public Health. (2010). Massachusetts Births 2008. Retrieved August 27, 2010, from http://www.mass.gov/Eeohhs2/docs/dph/research_epi/birth_report_2008.pdf.
- 7 Ibid.
- 8 Ibid.
- 9 Ibid.
- 10 Long, S., Stockley, K., Birchfield, L., & Shulman, S. (2010, June). The impacts of health reform on health insurance coverage and health care access, use and affordability for women in Massachusetts. Retrieved August 28, 2010, from Urban Institute and Blue Cross Blue Shield Foundation Web site: <http://bluecrossfoundation.org/~media/Files/Publications/Policy%20Publications/060210ImpactsonWomenFINAL.pdf>.
- 11 National Women's Law Center. (2010). National report card on women's health. People in medically underserved areas. Retrieved August 26, 2010, from <http://hrc.nwlc.org/status-indicators/Womens-Access-to-Health-Care-Services/People-in-Medically-Underserved-Areas.aspx>.
- 12 Merritt Hawkins & Associates. (2009). 2009 Survey of physician appointment wait times. Retrieved August 26, 2010, from <http://www.merrithawkins.com/pdf/mha2009waittimesurvey.pdf>.
- 13 American College of Nurse-Midwives. (2008, August). Certified nurse-midwives in Massachusetts. Retrieved August 28, 2010, from http://www.midwife.org/siteFiles/legislative/Massachusetts_09.pdf.
- 14 Midwives Alliance of North America. (2010, May 18). Direct-entry midwifery state-by-state legal status. Retrieved August 26, 2010, from <http://mana.org/statechart.html>.
- 15 The 186th General Court of the Commonwealth of Massachusetts. (2010). Bill Details: S2341 Retrieved August 28, 2010, from <http://www.malegislature.gov/Bills/Details/8457>.

This fact sheet was developed for the September 2010 roundtables project "Midwifery Care in New England: Addressing the Needs of Underserved and Diverse Communities of Women" sponsored by the U.S. Department of Health and Human Services (HHS) Office on Women's Health (Region I).

For more information please contact:

Center for Women in Politics & Public Policy
John W. McCormack Graduate School of Policy Studies
University of Massachusetts Boston
100 Morrissey Boulevard
Boston, MA 02125-3393
Ph: 617.287.5541 · Fax: 617.287.5566
Email: cwppp@umb.edu · Web: www.mccormack.umb.edu/cwppp