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Recommended Citation

Hiersteiner, Dorothy, "Women's Health Disparities and Midwifery Care: Spotlight on New Hampshire" (2010). *Publications from the Center for Women in Politics and Public Policy*. 48.
https://scholarworks.umb.edu/cwppp_pubs/48

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Women's Health Disparities and Midwifery Care Spotlight on New Hampshire

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Snapshot

New Hampshire faces significant obstacles to serving the nearly 6% of the population living in medically underserved areas. In addition, many residents of New Hampshire are uninsured, limiting their access to vital medical care. According to 2007-8 data, the racial/ethnic breakdown of New Hampshire residents is: 1% African American/black, 2% Hispanic, 94% non-Hispanic white and 3% Other. In 2005, 5.9% of the total New Hampshire population was foreign born.¹ Since 1996, New Hampshire has seen increases in low birth weight births, cesarean births², and infant mortality with racial/ethnic disparities reflected in most maternal and infant indicators.

Reproductive, Maternal and Infant Health

Prenatal Care

- In 2006, approximately 1 in 25 infants (4.1% of live births) was born to a woman receiving late or no prenatal care in New Hampshire.³
- Between 2001 and 2003, 4.2% of African American/black women in New Hampshire received late or no prenatal care.⁴
- During the same time period, 3.2% of Hispanic women in the state received late or no prenatal care.⁵
- Only 1.2% of non-Hispanic white women received late or no prenatal care during the same time period.⁶

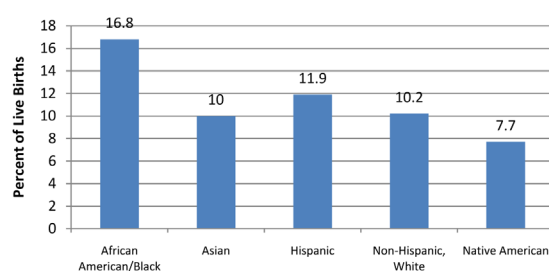
Preterm Birth

As Figure 1 indicates, African American/black and Hispanic infants have the highest rates of preterm birth, according to 2004-2006 average rates.

Low Birth Weight

Between 1996 and 2006, the rate of low birth weight infants

Figure 1
Preterm Birth by Race/Ethnicity, New Hampshire, 2004-2006 Average



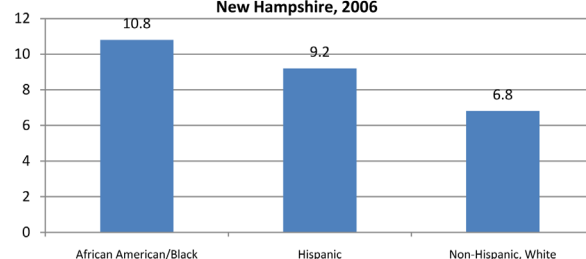
Source: Marchofidimes.com/peristats, Accessed 13 August 2010

increased nearly 44%. In 2006, 1 in 15 babies (6.9% of live births) was low birth weight. Figure 2 shows that, in 2006, African American/black and Hispanic infants were more likely than non-Hispanic white infants to weigh less than 5.5 pounds at birth.

Infant Mortality

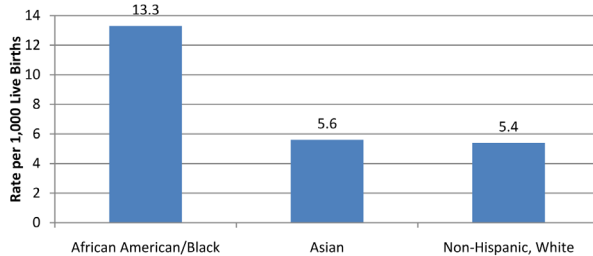
In New Hampshire in 2006, 85 infants died before reaching their first birthday, resulting in an infant mortality rate of 5.9 per 1,000 live births. Between 1996 and 2006, the infant mortality rate in New Hampshire increased 23%. As demonstrated in Figure 3 on the next page, the rate is considerably higher for African American/black infants at 13.3 per 1000 live births compared to the rate for non-Hispanic white infants (5.4 per 1000 live births).

Figure 2
Low Birth Weight Births as a Percent of All Births by Race/Ethnicity, New Hampshire, 2006



Source: Statehealthfacts.kff.org, Accessed 13 August 2010.

Figure 3
Infant Mortality Rates by Race, New Hampshire,
2004-2006 Average



Source: Marchofdimes.com/peristats, Accessed 13 August 2010

Health Insurance, Access and Providers

In 2008, 11.8% of non-elderly women aged 19-64 living in New Hampshire were uninsured. Just over 4% (4.3%) of all women aged 19-64 were covered by Medicaid.⁷ In 2003, 23.3% of all births in New Hampshire were covered by Medicaid.⁸ Nearly 6% of the New Hampshire population lives in federally designated medically underserved areas.^{9, 10}

Midwifery Care

In 2008, there were 72 Certified Nurse-Midwives (CNMs) and 63 nurse-midwifery practice sites in New Hampshire. In 2004, New Hampshire CNMs attended 2,407 births, which represented 22.8% of the state's births for that year. CNMs in New Hampshire practice under the Nurse Practice Act as advanced registered nurse practitioners and are regulated by the Board of Nursing. State legislation in New Hampshire provides CNMs with third-party payment. Since 1985, New Hampshire CNMs have had prescription writing privileges.¹¹

In New Hampshire, a Certified Midwife is a midwife who has been certified through the New Hampshire Midwifery Council.¹² Currently the Certified Professional Midwife credential awarded by the North American Registry of Midwives (NARM) is used as the certification credential. CPMs practice throughout the state primarily in the client's home.

Selected Resources, Programs and Initiatives

Prenatal Program

The Prenatal Program through the New Hampshire Department of Health and Human Services provides funding to 12 community health agencies to provide prenatal care to low income, uninsured and underinsured pregnant women. New Hampshire supports prenatal care in community based agencies throughout the state for families with incomes at or below 185% of the federal poverty level.

<http://www.dhhs.state.nh.us/DHHS/MCH/pp.htm>

Home Visiting New Hampshire (HVNH)

This preventive program provides health, education, and support services as well as linkages to other community services for Medicaid-eligible pregnant women and their families.

<http://www.dhhs.state.nh.us/DHHS/MCH/hvnh.htm>

New Hampshire Birth Conditions Program (NH BCP)

This population-based, active surveillance program is designed to: detect trends in the occurrence of birth conditions; quantify the associated morbidity and mortality; stimulate epidemiological and biologic research; evaluate the need for and facilitate access to supportive health services; guide and assess the progress of state-wide prevention activities; and educate the community, health care providers and service agencies regarding birth conditions.

<http://www.nhbcp.org>

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).

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