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# THE BRONX HEALTH LINK, INC.

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**TESTIMONY OF JOANN CASADO,  
EXECUTIVE DIRECTOR OF THE BRONX HEALTH LINK, INC.  
Hearings by the New York City Council Health Committee on  
Mayor's FY 2008 Preliminary Budget  
March 12, 2007**

My name is Joann Casado, and I am Executive Director of the Bronx Health Link, Inc., which is a clearinghouse for members of the health and human service delivery system of the Bronx. We reach over 500 members and agencies that actively participate in an electronic mailing list and numerous workgroups, advisory boards and task forces. We also coordinate the Perinatal Information Network and thus work extensively with the community and health care providers to improve birth outcomes, prenatal care and the reproductive health of Bronx women. We are currently updating our yearly Needs Assessment for Maternal and Infant Health. Thank you for the opportunity to testify today.

The Bronx's rates of infant mortality, maternal mortality, and percentages of prematurity, low birth weight, teen pregnancy, and late or no prenatal care exceed—in some cases substantially—those of the city and the country. Several of our poorest neighborhoods have been particularly hard hit. In addition, a large racial disparity remains with African American and Latino mothers and babies at greatest risk.

The rate of infants dying before the age of one year continues to be shockingly high. Within the Bronx, the highest infant mortality rates are in Morrisania, Williamsbridge and East Tremont. The city's infant mortality rate among African Americans continues to be double that of whites, with Puerto Ricans close behind. The Department of Health and Mental Hygiene has noted, "If the infant mortality rate among African Americans decreased to that of whites, nearly 200 fewer babies would die each year." Meanwhile, more than 10% of infants born in the Bronx—the highest percentage of any borough--have low birth weight, which puts them at much higher risk of serious health problems and even death. In addition, the maternal mortality rate for the Bronx continues to exceed the citywide rate. Studies indicate that as many as half of all pregnancy-related deaths could be prevented if women had better access to health care, received better quality care, and made changes in their health and lifestyle habits.

Teenage mothers are much less likely to obtain prenatal care, and are at especially high risk for serious illnesses; their babies are at a higher risk of low birth weight and preterm delivery. The percentage of teen births in the Bronx (12%) remains twice the Manhattan figure (6%). Within the Bronx, percentages are even higher in Mott Haven, Hunts Point, East Tremont, and Morrisania. Two-thirds of Bronx births are to women on Medicaid. Districts with even higher proportions of delivering women on Medicaid are Mott Haven, Hunts Point, Unionport/Soundview, Concourse/ Highbridge, Fordham, and Williamsbridge. In addition, an estimated 20% of women of childbearing age statewide are uninsured. Numerous studies have found that

uninsured pregnant women are less likely to receive prenatal care than women who have private insurance. Meanwhile, another recent study found that hospitalized children who lack health insurance are twice as likely to die from their injuries as those with insurance. In this regard, it is vital to restore funds to the city's network of Child Health Clinics, which serve infants, children and adolescents regardless of the parents' ability to pay. In addition, it is important for all uninsured and underinsured patients that the Council reinstates funding for the HHC Outpatient Medication Waivers, which covers those who cannot afford the \$10 fee per prescription.

Despite severe health challenges, there are thousands of women who survive and do well in the borough. Many of the risk factors for maternal and infant illness and death are well-known and the Bronx Health Link is one of several agencies in the borough funded by the City Council's Infant Mortality Reduction Initiative, administered by the New York City Department of Health and Mental Hygiene, as well as from other sources, but funding remains inadequate to reach all those in need. Thus it is imperative that the Mayor's Preliminary Budget provide funding for this life-saving program. Prenatal care is key to healthy pregnancy and childbirth, and must start early to be fully effective. In 2004, 25% of pregnant women in the Bronx obtained late or no care, and the percentages were higher in Fordham, Bronx Park, Central Bronx, Highbridge, Morrisania, Mott Haven, and Hunts Point. In addition, 41% of Bronx pregnant women obtained what the Health Department deemed inadequate prenatal care. Thus, programs for education, counseling and direct services for pregnant and nursing mothers and their infants need to be created, funded, and implemented, or -- where they exist -- greatly expanded.

More than half of the mothers giving birth in the Bronx are immigrants, overwhelmingly from Latin America, and these numbers grow every year. More than half of Bronx residents speak a language other than English (mainly Spanish). Although the State Patients' Bill of Rights requires that a hospital provide interpreters in any language spoken by at least 1% of the hospital's service area, a 2005 study by the New York City Comptroller<sup>1</sup> found that nearly 75% of the 51 hospitals surveyed failed to provide Spanish-language services to callers. A 2006 report by the New York Academy of Medicine found that half of the city's immigrants reported that language barriers led to reduced quality care for their children and prevented them from fully using healthcare services.<sup>2</sup> Last September, State regulations went into effect requiring hospitals to provide interpretation services for patients with limited English proficiency. Thus, it is critical that the funds for HHC Translation Services be restored to this year's budget.

Finally, asthma rates in the Bronx are the highest of any borough, particularly among children. Although many agencies in the Bronx provide educational programs on asthma management, the Mayor's budget does not include funding for community-based asthma treatment programs.

In summary, the Bronx's shameful infant and maternal mortality rates can be reversed. The health of our youngest and poorest can be protected. Access to health services for non-English-

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<sup>1</sup> City of New York, Office of the Comptroller, Getting in the Door: Language Barriers to Health Services at New York City's Hospitals, January 10, 2005. Available at [http://www.comptroller.nyc.gov/press/2005\\_releases/pr05-01-004.shtm](http://www.comptroller.nyc.gov/press/2005_releases/pr05-01-004.shtm) (accessed January 23, 2007).

<sup>2</sup> New York Academy of Medicine, Language as a Barrier to Healthcare for New York City Children in Immigrant Families, May 2006. Available at <http://www.nyam.org/news/2668.html> (accessed January 23, 2007).

speakers can be enhanced. We strongly urge you to recommend that the Mayor's budget restore funding for the Infant Mortality Reduction Initiative, HHC Outpatient Medication Waivers, Child Health Clinics, HHC Translation Services, and community asthma programs.

Thanks for your time and attention.