

Tulane, Ochsner Health and RH Impact receive \$16.5 million NIH grant to address maternal health and equity

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The collaboration is part of 10 newly announced research centers focused on reducing pregnancy-related complications and deaths and promoting maternal health equity. (Photo by iStock)

Tulane University, Ochsner Health and the community nonprofit RH Impact have been awarded a seven-year, \$16.5 million grant from the National Institutes of

Health to establish a research center of excellence focused on finding solutions to address Louisiana's disproportionately high maternal mortality rate.

The new Southern Center for Maternal Health Equity will be one of [10 newly announced Maternal Health Research Centers of Excellence](#) nationwide funded by the NIH's [Implementing a Maternal health and PRegnancy Outcomes Vision for Everyone \(IMPROVE\) initiative](#).

The center will develop and evaluate innovative approaches to reduce pregnancy-related complications and deaths and promote maternal health equity in the Gulf South. Additional collaborators include Dillard University and the University of Mississippi Medical Center.

Louisiana has one of the highest maternal mortality rates in the country with 39 out of every 100,000 mothers dying during or shortly after childbirth. In Louisiana, Black pregnant and postpartum people are 3 to 4 times more likely to die from complications related to pregnancy compared to their White counterparts, according to CDC data.

"Despite the dire state of maternal health in the Gulf South, few large-scale, national efforts include this region, and addressing the ongoing maternal health crisis is not possible without centering Black pregnancy," said co-principal investigator [Emily Harville](#), PhD, perinatal epidemiologist at Tulane University School of Public Health and Tropical Medicine. "The Research Center will incorporate community priorities, vision, and expertise into multilevel research projects across the region and train graduate students and early career researchers to address inequities, returning the results directly to the impacted communities."

Compared to other high-income countries, the United States has a high rate of maternal deaths, with more than 1,200 such deaths occurring in 2021. Each year tens of thousands more Americans experience severe pregnancy-related complications, which can raise the risk of future health concerns, including high blood pressure, diabetes and mental health conditions. There are stark disparities in these maternal health outcomes by racial and ethnic group, age, education, socioeconomic status and geographic region.

"The establishment of the Southern Center for Maternal Health Equity provides an unprecedented opportunity to bring together experts from a variety of disciplines to explore and implement interventions and modifications to healthcare delivery.

These will be driven by community needs and begin to address the root causes of poor maternal and perinatal outcomes as well as gaps in care,” said co-principal investigator Joseph Biggio, MD, MS, system chair and service line leader of Women’s Services and system chair of Maternal-Fetal Medicine at Ochsner. “The project has the ability to improve outcomes not only for those who are currently in the reproductive age range but also has the potential to provide positive impact and change for future generations.”

“Our team at RH Impact is excited to partner with Tulane University and Ochsner. This opportunity will enable us to explore and propel birth equity research to ensure equitable care, treatment, and outcomes for birthing people,” said co-principal investigator Susan Perez, PhD, of RH Impact, a Black woman-led organization that creates transnational solutions to optimize Black infant health, maternal health, and sexual and reproductive well-being.

The NIH centers of excellence include 10 research centers, a data innovation and coordinating hub and an implementation science hub. Together, these institutions will work to design and implement research projects to address the biological, behavioral, environmental, sociocultural and structural factors that affect pregnancy-related complications and deaths. They will focus on populations that experience health disparities, including racial and ethnic minorities, socioeconomically disadvantaged populations, those living in underserved rural areas, sexual and gender minority populations and people with disabilities.

Harville said the project will emphasize a community-based approach that will seek to meet new and expecting mothers where they live. Strategies include training medical professionals and hospital staff to reduce biased treatment, identifying community supports for women after they leave the hospital, and implementing remote home monitoring systems in maternal healthcare deserts and other areas with low access to health care.

“No projects that we are aware of have such a unified academic, clinical, and community partnership,” Harville said. “Building on an existing portfolio of research and technological innovation, the research center will test and implement community priorities and insights into actionable and effective strategies for improving maternal health.”

Research centers will partner with community collaborators, such as state and local public health agencies, community health centers and faith-based organizations. Additionally, the research centers will support training and professional development of maternal health researchers, including those from backgrounds underrepresented in the biomedical research workforce.

The center advances the mission of Healthy State, a bold project that includes Ochsner, Tulane and other healthcare, research and nonprofit institutions. By engaging organizations across the state, Healthy State collaborators work together to tackle the leading causes of poor health to realize a healthier, more equitable state and create profound impact for Louisiana residents.