



# MATERNAL MORTALITY AND MORBIDITY IN MISSOURI

## DID YOU KNOW?



**Maternal mortality** is on the rise in the U.S., even as it is declining globally



**60,000 women suffer from maternal morbidity:** severe complications during childbirth that may have life-long effects on their health and wellbeing



The leading causes of maternal death in the U.S. **include excessive bleeding, high blood pressure, blood clots, and heart disease**



**Black women are 3-4 times more likely to die** during pregnancy and childbirth than White women



The rise in chronic health conditions is contributing to pregnancy and childbirth complications. **Nearly 30% of women\*** are obese or have been told they have at least one chronic condition



**Maternal mortality and morbidity are costly to the health system:** for example, California's Medicaid system incurred \$200M to treat pregnancy complications related to excessive bleeding and high blood pressure

Women are the cornerstone of a healthy and prosperous world. When a woman dies, the ripple effect on her family and community is enormous. The United States (U.S.) is one of very few developed countries where deaths related to pregnancy or childbirth are increasing. What's even more surprising is that nearly 60% of these maternal deaths are preventable.

**Merck for Mothers is Merck's 10-year, \$500 million initiative to end preventable maternal deaths worldwide. We collaborate with more than 90 partners in over 30 countries to improve access to quality maternal health care.**

## Focus

Merck for Mothers is working in 16 states to address **four major contributors** to maternal mortality: **inconsistent obstetric care** across hospitals; **lack of good data** to understand why women are dying; **the rise of chronic conditions** like obesity, high blood pressure, diabetes and heart disease; and **minimal awareness of and attention to** the problem.

## Approach

Merck for Mothers supports organizations at the policy, hospital, and community levels to develop solutions and tools to end the preventable tragedy of women dying while giving life.

## Top Priorities

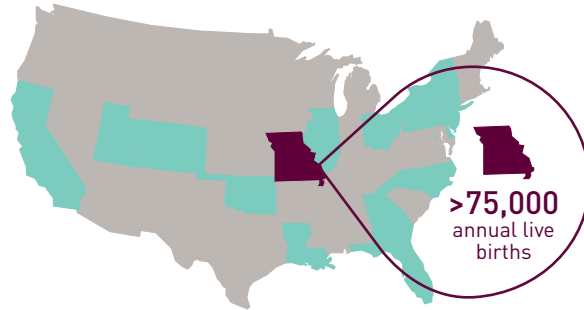
- ✓ Ensure that every hospital is prepared to respond to obstetric emergencies
- ✓ Count, review, and report every maternal death
- ✓ Link women with chronic conditions to care to improve health before, during, and after pregnancy
- ✓ Raise awareness of maternal mortality and morbidity as a serious — but solvable — problem



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## SPOTLIGHT ON MATERNAL HEALTH IN MISSOURI

Over the last several years, the rate of maternal mortality in Missouri has nearly quadrupled. Pre-pregnancy obesity has more than doubled over the last 20 years, and racial disparities are evident: Black women are approximately 2.5 more likely to die during pregnancy and childbirth than White women. One fifth of mothers reported they did not receive prenatal care during their first trimester, and almost half started prenatal care late.



The maternal mortality rate is

# 24 DEATHS

per 100,000 live births

# 10% OF WOMEN\*\*

have been told they have diabetes;



# 7%

of women knew they had gestational diabetes during pregnancy

# 31% OF WOMEN\*\*

have been told they have high blood pressure



# 24% OF WOMEN

were obese prior to pregnancy

## Our Partners and Projects



**Counting and Reviewing Maternal Deaths:** The CDC Foundation and the Association of Maternal and Child Health Programs are building Missouri's capacity to review maternal deaths, determine why they occur, and develop actionable recommendations to prevent future tragedies. The Missouri Department of Health and Senior Services solicited community perspectives on major barriers to care for pregnant women, including lack of access to care, prevalence of chronic conditions and substance use, and unhealthy lifestyles. The state also conducted a survey to assess health providers' knowledge, attitudes, and practices regarding maternal mortality and identify ways to improve maternity care.



\*Women of reproductive age (18-44). \*\*Women over 18 years of age.