



MATERNAL MORTALITY AND MORBIDITY IN NEW YORK

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.

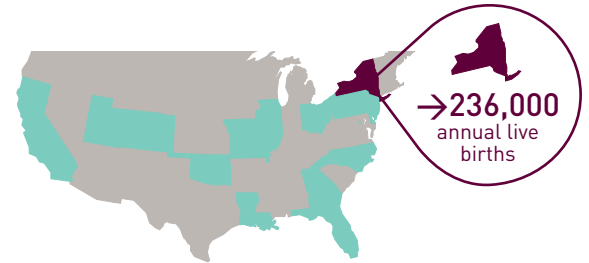
Top Priorities

- ✓ 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 NEW YORK


New York has one of the highest maternal mortality rates in the country. Over the past decade, the state has experienced a 60% increase in maternal mortality. The leading causes of maternal death include high blood pressure and excessive bleeding. Racial disparities are also evident, particularly in New York City, where more than half of all births take place: Black women are 12 times more likely to die during pregnancy and childbirth than White women and three times more likely to suffer from life-threatening complications.



The maternal mortality rate is

18.7
DEATHS
per 100,000 live births

28%
OF WOMEN**

 have been told they have high blood pressure

20%
OF WOMEN

were obese prior to pregnancy 

9%
OF WOMEN**

 have been told they have diabetes.

Only about

2/3

of pregnant women receive adequate prenatal care

Our Partners and Projects



Ensuring Obstetric Emergency

Preparedness: The American College of Obstetricians and Gynecologists District II worked with 117 hospitals in New

York to ensure that health providers use

evidence-based practices to quickly diagnose and treat childbirth emergencies related to high blood pressure, excessive bleeding, and blood clots.



Counting and Reviewing Maternal Deaths:

The CDC Foundation and the Association of Maternal and Child Health Programs are building New York's capacity to review maternal deaths, determine why they occur, and develop actionable recommendations to

prevent future tragedies. The New York State Department of Health developed new guidelines for managing disorders of pregnancy related to high blood pressure, which were disseminated to all New York State birthing hospitals (126 hospitals).



Understanding the Drivers of Maternal Mortality and Morbidity:

In New York City, the NYC Department of Health and Mental Hygiene, in collaboration with the Fund for Public Health in

New York, conducted the nation's first citywide analysis of life-threatening complications during childbirth, known as severe maternal morbidity. The findings were striking: approximately 2,500 women experience these serious complications each year. The City is now developing processes and systems to incorporate severe maternal morbidity review into its maternal mortality review to learn more about these cases and how to prevent them in New York and nationally. Columbia University's Averting Maternal Death and Disability program is exploring the treatment women receive during childbirth to help ensure that all women in the U.S. receive appropriate and respectful maternity care.



Linking Pregnant Women to Care: Northern Manhattan Perinatal Partnership is testing a new model to connect pregnant women with chronic conditions to the care and support

services they need to enjoy healthy, safe pregnancies and to improve their long-term wellbeing.

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