National Maternal Health Initiative
A Comprehensive Collaborative Strategy

Keisher Highsmith, Dr.P.H.
Maternal and Child Health Bureau
Health Resources and Services Administration
Department of Health and Human Services
Overview of Presentation

• Maternal Morbidity and Mortality in the U.S.
• HRSA/Maternal and Child Health Bureau
• National Maternal Health Initiative (NMHI)
U.S. Maternal Mortality

- 2007-2008 Maternal mortality increased from 12.7 to 15.5 deaths per 100,000 live births.
- Leading causes for maternal mortality are preeclampsia, obstetric hemorrhage, embolisms, and cardiovascular disease.
  - Deaths attributable to hemorrhage and hypertensive disorders
  - Deaths attributable to cardiovascular disease
- AA women have a 3-4 times higher risk

Source: HRSA, 2008; CDC 2013; D’Alton, 2012; Berg, Callaghan et al., 2010)
## Selected Maternal Morbidities and Risk Factors in Pregnancy by Race/Ethnicity, 2010*

<table>
<thead>
<tr>
<th>Rate per 1,000 live births</th>
<th>Chronic Diabetes</th>
<th>Gestational Diabetes</th>
<th>Chronic Hypertension</th>
<th>Pregnancy Associated Hypertension</th>
<th>Eclampsia</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
<td>7.0</td>
<td>44.2</td>
<td>12.7</td>
<td>43.4</td>
<td>2.0</td>
</tr>
<tr>
<td><strong>Non-Hispanic White</strong></td>
<td>6.3</td>
<td>42.1</td>
<td>12.6</td>
<td>48.2</td>
<td>2.1</td>
</tr>
<tr>
<td><strong>Non-Hispanic Black</strong></td>
<td>9.5</td>
<td>36.7</td>
<td>26.8</td>
<td>54.5</td>
<td>3.2</td>
</tr>
<tr>
<td><strong>Hispanic</strong></td>
<td>7.2</td>
<td>44.6</td>
<td>7.0</td>
<td>32.4</td>
<td>1.5</td>
</tr>
<tr>
<td><strong>Non-Hispanic American Indian/Alaska Native</strong></td>
<td>15.8</td>
<td>53.4</td>
<td>17.6</td>
<td>51.0</td>
<td>3.6</td>
</tr>
<tr>
<td><strong>Non-Hispanic Asian</strong></td>
<td>6.3</td>
<td>80.8</td>
<td>7.1</td>
<td>24.6</td>
<td>0.9</td>
</tr>
<tr>
<td><strong>Non-Hispanic Native Hawaiian/Other Pacific Islander</strong></td>
<td>11.5</td>
<td>63.4</td>
<td>12.3</td>
<td>43.9</td>
<td>3.3</td>
</tr>
<tr>
<td><strong>Non-Hispanic Multiple Race</strong></td>
<td>7.0</td>
<td>45.4</td>
<td>14.7</td>
<td>43.4</td>
<td>2.7</td>
</tr>
</tbody>
</table>

*Data are from 33 States that implemented the 2003 revision of the death certificate as of January 1, 2010, representing 76 percent of all U.S. births.

**Data Source:** Centers for Disease Control and Prevention, National Center for Health Statistics. 2010 Natality Public Use File.

Analysis conducted by the Maternal and Child Health Information Resource Center.
Severe Morbidity or “Near-Miss”

• Severe maternal morbidity increased by 75% for deliveries in hospitals and 114% in postpartum hospitalization (Callaghan et al., 2012)

• Severe Morbidity Indicators - blood transfusion, hysterectomy, eclampsia. (Callaghan et al., 2008)

• Adequate control of diabetes and hypertension before/during pregnancy can reduce the risk of maternal morbidity/mortality
Economic Burden of Maternal Morbidity & Mortality in the U.S.

- Hospital maternal stays with pregnancy and delivery-related complications account for approximately 5% of total hospital costs in the U.S. (AHRQ, 2011)

- 94% of hospital deliveries has some type of complication. (AHRQ, 2011)

- Average cost of hospital stays with complications $3,900 to $4,100 compared to $2,600 with no complications. (AHRQ, 2011)
IMPROVE HEALTH AND ACHIEVE HEALTH EQUITY THROUGH ACCESS TO QUALITY SERVICES, A SKILLED HEALTH WORKFORCE AND INNOVATIVE PROGRAMS.
Maternal and Child Health Bureau

Mission: To promote and improve the health of women and children across the nation.

- Title V State Block Grant
- Autism Initiative
- Emergency Medical Services for Children
- Family to Family Health Information Centers
- Healthy Start
- Maternal, Infant, and Early Childhood Home Visiting
- Sickle Cell Disease
- Traumatic Brain Injury
- Universal Newborn Hearing Screening
A Comprehensive approach to reducing maternal morbidity and mortality in the United States

THE NATIONAL MATERNAL HEALTH INITIATIVE
National Maternal Health Initiative
Vision

Healthy Women, Healthy Mothers, Healthy Babies
National Maternal Health Initiative

Mission

Develop and implement a national comprehensive initiative to strengthen state and local systems capacity and infrastructure to promote, protect and improve maternal health by strengthening state maternal morbidity/mortality surveillance, ensure quality and safety in maternity care, support state and community-based strategies that improve access to care and provide a platform conducive to collaborative learning and sharing best practices. This mission is accomplished through coordination and collaboration within HRSA, across HHS agencies and with professional and private organizations.
National Maternal Health Initiative

Goal

• Improve women’s health across the life course
• Improve the quality and safety of maternity care.
Priority Areas

• Surveillance & Research
• State & Community Public Health Systems
• Quality & Safety of Clinical Care
• Public Awareness
• Women’s Health
Guiding Principles for a National Maternal Health Strategy

- Collaboration & Coordination
- Translation
- Dissemination/Education for Action
- Training & Capacity Building
National Maternal Health Initiative

Upcoming Event

• Town Hall Meeting on Maternal Health (September 2013)
Contact Information

Keisher Highsmith, Dr.P.H.
Director, Special Initiatives and Program Planning/Evaluation
Division of Healthy Start and Perinatal Services

khighsmith@hrsa.gov
www.mchb.hrsa.gov