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## **Department of Health Announces Release of 2023 Maternal Mortality Review Report**

*New findings suggest 80% of pregnancy-related deaths were preventable*

**OLYMPIA** -- The Washington State Department of Health (DOH) has released its 2023 Maternal Mortality Review Report, with findings that behavioral health conditions, including suicide and overdose, remain the leading causes of pregnancy-related deaths. The report is based on reviews conducted by DOH's [Maternal Mortality Review Panel](#) (MMRP). DOH publishes maternal mortality reports every three years, as required by the Washington State Legislature.

The MMRP reviews pregnancy-associated deaths from any cause during or within one year of pregnancy and determines which were pregnancy-related deaths due to a pregnancy complication, a chain of events initiated by pregnancy, or aggravation of unrelated condition(s) caused by the psychological effects of pregnancy.

The 2023 report examines cumulative data from 2014–2020 pregnancy-associated and pregnancy-related deaths and contains policy and funding recommendations from 2017--2020 deaths.

The MMRP identified 224 pregnancy-associated deaths from 2014–2020 and classified 97 of these as pregnancy-related.

- There were 15.9 pregnancy-related deaths per 100,000 live births from 2014–2020 in Washington, which was lower than the U.S. rate of 18.6 pregnancy-related deaths per 100,000 live births in this timeframe.
- Leading underlying causes of pregnancy-related deaths were behavioral health conditions (32%), predominantly by suicide and overdose. Other common causes were hemorrhage (12%) and infection (9%).

- The Panel found 80% of pregnancy-related deaths were preventable, meaning there was at least some chance of the death being averted if a clinical or social factor that contributed to the death had been different.
- The pregnancy-related mortality rate was greater for individuals over the age of 30. American Indian and Alaska Native people experienced higher maternal mortality rates than any other race/ethnic group. (An addendum from the American Indian Health Commission at the end of the report outlines policy recommendations to address factors contributing to Native maternal mortality).

“The maternal mortality rate in Washington is lower than the national rate, but we need to do more to prevent any such death,” said Lacy Fehrenbach, Chief of Prevention, Safety and Health, Washington State Department of Health. “Addressing root causes of inequities and improving access to high-quality care in pregnancy, delivery, and postpartum are key ways our state can make progress toward that goal.”

While maternal mortality rates in Washington state have varied over individual years, they are considered stable overall and, unlike national rates, are not increasing. However, due to inequities, discrimination, and socioeconomic factors, some communities experience disproportionately high rates of maternal mortality. Moreover, as behavioral health conditions now account for roughly one third of pregnancy-related deaths, the need for expanded access to both mental health care and substance abuse treatment, as well as screening and treatment for pregnant and parenting people, is crucial to improving maternal mortality rates.

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