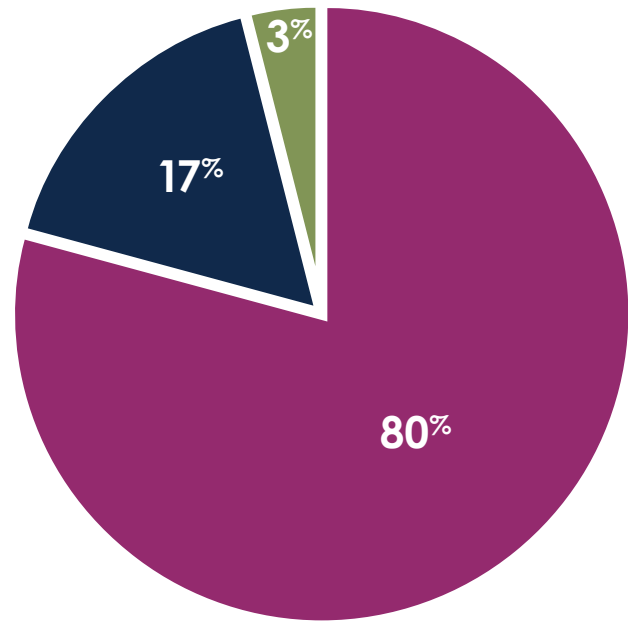


We still have work to do to prevent pregnancy-related deaths...



The Panel found that **80% of all pregnancy-related deaths were preventable**. That's a higher percentage of preventable deaths than in previous reports. It reflects the Panel's expanded understanding of preventability, and it means we have more ways to take action. To determine whether a death was preventable, the Panel considers not just clinical factors, but also factors related to equity and social determinants of health, such as racism or a lack of stable housing.

Preventability of Pregnancy-Related Deaths (n=97), Washington State, 2014–2020



Of all people who died from pregnancy-related deaths...



27%

were pregnant at the time of death



11%

died the same day as delivery



31%

died within 42 days of end of pregnancy



31%

died within 43 days to one year of end of pregnancy



How you can help....

- To read the full report and recommendations or to learn more about the Maternal Mortality Review Panel, visit www.doh.wa.gov/maternalmortality or contact us at maternalmortality@doh.wa.gov
- To learn more about how to help implement the Maternal Mortality Review Panel's recommendations, or to participate in the Washington State Perinatal Collaborative, visit www.doh.wa.gov/you-and-your-family/womens-health/washington-state-perinatal-collaborative-wspc

Maternal Mortality Review Panel

March 2023



Prevention Recommendations and Activities for Policymakers

Maternal Deaths 2014–2020

224 pregnancy-associated deaths occurred between 2014 and 2020.

- Of those deaths, **97** were directly related to pregnancy.
- Leading causes of pregnancy-related deaths: behavioral health conditions (32%, predominantly by suicide or overdose); hemorrhage (12%); and infection (9%).



PRIORITY RECOMMENDATIONS FOR POLICYMAKERS

Undo Racism and Bias

Address racism, discrimination, bias, and stigma in perinatal care.

- Expand and diversify the **perinatal workforce** to reflect the cultures and languages of the communities they serve.
- Prioritize **access** to **perinatal care** in communities **experiencing inequities** by funding culturally competent care, interpreter services, and out-of-hospital care, including midwifery and doula services.
- Fund **initiatives** such as the Birth Equity Project and Health Equity Zones that **address structural racism** and **social drivers** of health.

Address Mental Health and Substance Use Disorder

Increase access to mental health and substance use disorder prevention, screening, and treatment for pregnant and parenting people.

- Enhance **reimbursement** for mental health and substance use disorder **screening**.
- Boost the number of residential treatment **facilities** that allow parents to **bring their children**.
- Ensure that all health plans provide **coverage** for additional postpartum **hospital days** for people who need medication for **opioid use disorder**, stabilization and support.
- Fund HCA and DCYF to expand access to culturally appropriate, **community-centered treatment programs**, including tribally led programs.
- Expand **home visiting** programs for birthing people experiencing **behavioral health** issues.
- Integrate **state peer recovery** services into on-site perinatal substance use services.

Enhance Health Care Quality and Access

Expand equitable and high-quality health care by improving care integration, expanding telehealth services, and increasing reimbursement.

- Expand **home visiting** services for pregnant and postpartum families.
- Support legislation to **increase access to doulas and midwives** through one year postpartum, prioritizing areas with limited access.
- Increase funding for **out-of-hospital birthing** care, such as midwifery.
- Fund **telehealth infrastructure**, including cell phone, Wi-Fi, and broadband access in rural areas.
- Provide funding to **help smaller** perinatal care facilities **share electronic records** with other health care systems.
- Ensure providers **know that** commercial health plans **cover telehealth services in parity** with in-person services.
- Adequately fund existing **rural hospitals** and **tribal clinics** to provide obstetric care.

PRIORITY RECOMMENDATIONS FOR POLICYMAKERS

Strengthen Clinical Care

Strengthen perinatal clinical care by making it comprehensive, coordinated, culturally appropriate, and adequately staffed.

- Create **quality improvement** incentive programs for **outpatient** perinatal services.
- Provide funding to state agencies and providers to implement **improvement initiatives** like the Alliance for Innovation on Maternal Health (AIM) Safety Bundles.
- Expand funding for comprehensive **sexual and reproductive** health care services.
- Support efforts to prioritize prevention and treatment of **respiratory** infections in the **perinatal** period, such as COVID-19 and influenza.
- Increase and diversify the perinatal health workforce to address staffing **shortages**, meet increased health system **demands**, and improve care **quality**.

Meet Basic Human Needs

Meet basic needs of pregnant and parenting people by prioritizing access to housing, nutrition, income, transportation, child care, care navigation, and culturally relevant support services.

- Increase access to safe, affordable, **stable housing** for pregnant people, parents, and children.
- Increase funding for education, employment, child care, transportation, and other **services people need** throughout life.
- Fund **care navigation** programs to make it easier for pregnant and parenting people to access social programs.
- Pilot a **guaranteed basic income** program for the **perinatal** period.

Address and Prevent Violence

Prevent violence in the perinatal period through survivor-centered and culturally appropriate coordinated services.

- Protect access to the **full range of reproductive health services**.
- Fund public health approaches to **upstream violence prevention** at the population level.
- Increase funding to **support survivors** of intimate partner violence.
- Fund **safe housing** for pregnant and postpartum people, including **shelter** and housing for people experiencing intimate partner violence.
- Fund **free legal services** for families to support survivors
- Expand policy and provide funding to **advance firearm safety**.