

# Soaring maternal mortality figures expose deplorable state of women's health care in America

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New international data show that the maternal mortality rate (MMR) in the US continues to far exceed the rate in other high-income countries. This national scandal in maternal health exposes, perhaps more than any other measure of the health of the US population, the appalling state of the health care system in America, which is subordinated to private profit.

Data from the Organisation for Economic Co-operation and Development (OECD) and the US Centers for Disease Control and Prevention (CDC)—analyzed by the Commonwealth Fund—show both a worsening of maternal death rates around the world in recent years and a widening gap between the US and other leading industrialized nations.

Maternal mortality is defined by the World Health Organization (WHO) as the death of a woman while pregnant or within 42 days of childbirth. In 2020, the latest year data are available from the CDC, the US maternal mortality rate was 23.8 deaths per 100,000 live births. By contrast, in the Netherlands that figure was only 1.2.

For black women in the US, maternal mortality in 2020 stood at an even more appalling rate: 55.3 deaths per 100,000 live births, exposing severe racial disparities in maternal health care in the US. For white women the rate was 19.1, while for Hispanic women it stood at 18.2, figures still more than double that in Canada, the US neighbor to the north.

American Indian and Alaska Native women are more than two times as likely as white women to experience maternal deaths.

US maternal mortality has been on the rise since 2000 and has spiked in recent years. The maternal death rate increased in six of the nine countries studied with figures available from 2020: Canada, Germany, Korea, Norway, Sweden and the US. Maternal mortality fell in 2020 in Australia, Japan and the Netherlands. (Figures were from 2015 in France, 2017 in the UK, 2018 in New Zealand and 2019 for Switzerland.)

In global ranking, the US stands at only 55th in maternal mortality rates, just behind Russia and ahead of Ukraine, according to the WHO.

In December 2020, the US Department of Health and Human Services declared maternal deaths a public health crisis. In October 2022, the CDC released new data gathered between 2017 and 2019 that showed a 27 percent increase from the agency's previous report covering years 2008 to 2017.

Of the deaths in 2020, 22 percent occurred during pregnancy, 13 percent during childbirth and 65 percent during the year following childbirth. (This one-year period differs from the 42 days after childbirth used by the WHO.)

CDC data show a steady increase in maternal deaths from 2018 through 2021: 658 deaths in 2018, 754 deaths in 2019, 861 deaths in 2020 and 1,178 deaths in 2021. This last year's data is provisional.

The CDC concluded that 84 percent of pregnancy-related deaths are preventable.

In the agency's latest report, mental health conditions are cited as the most frequent cause of pregnancy-related deaths, and approximately 23 percent of deaths are attributed to suicide, substance use disorder or other mental health conditions. Almost all deaths involving drug overdoses during pregnancy and the postpartum period involved opioids.

A woman in the US seeking care for substance abuse during pregnancy faces the possibility of criminal or civil penalties, including imprisonment and the prospect of having her child taken away by Child Protective Services. Currently, 24 states consider substance use during pregnancy to be child abuse, while health care providers in 25 states are required to report suspected prenatal drug use to the authorities.

Rachel Diamond, clinical training director and assistant professor at Adler University, writes in *The Conversation*: "Research has long shown that 1 in 5 women suffer from

mental health conditions during pregnancy and the postpartum period, and that this is also a time of increased risk for suicide. Yet, mental illness—namely, depression—is the most underdiagnosed obstetric complication in America.” Diamond says that maternal suicide has tripled in the last decade.

Following mental health, the next two leading causes of maternal death are hemorrhage and cardiac conditions, which account for about 14 and 13 percent, respectively.

The 2020 figures analyzed by the Commonwealth Fund are from the first year of the pandemic. A US Government Accountability Office (GAO) analysis of CDC data shows that COVID-19 was a contributing factor in one-quarter of all maternal deaths in 2020 and 2021.

CDC provisional data from 2021 show that of 1,178 maternal deaths reported, 401, or more than a third, were COVID-related. It can be anticipated that the overall rising trend in maternal mortality will continue as COVID-19 continues to surge across the globe.

A JAMA Network Open research letter published in June found an 18.4 percent increase in maternal mortality between 2019 and 2020. The CDC reports 658 deaths in 2018, 754 in 2019 and 861 in 2020. This is under conditions where the number of live births fell from 3,791,712 in 2018 to 3,613,647 in 2020.

In the Netherlands, which has the lowest MMR of the 14 countries studied, there was an increase in home births and vaginal deliveries and a decrease in cesarean sections (both planned and emergency), seeming to indicate these types of births were safer for women during the pandemic.

The US is the only country included in the Commonwealth Fund analysis that does not provide universal health care, leaving nearly 8 million women of reproductive age without medical coverage. Although the Affordable Care Act expanded Medicaid, the government health care plan for the poor, hundreds of thousands of women live in 11 states that have not expanded Medicaid under the ACA.

While Medicaid covers around four in 10 births, benefits under the program cover care only up to 60 days postpartum. Only about 40 percent of new mothers attend their postpartum visits. A March of Dimes report earlier this year found that one in four Native American women and one in five black women did not receive adequate prenatal care in 2020. The rate for white women was one in 10.

The March of Dimes found that nearly 7 million women of childbearing age and 500,000 babies live in counties that are “maternity care deserts,” i.e., they have no obstetric hospitals or birth centers and no obstetric providers. Over 2.8 million women of childbearing age and nearly 160,000 are impacted by reduced access to maternity care.

Following the US Supreme Court’s decision in *Dobbs v.*

*Jackson Women’s Health*, at least 15 states now have total or near-total abortion bans. A research letter from December 2021 published in Duke University Press projected that a total ban on all wanted abortions in the US would lead to a 7 percent increase in pregnancy-related deaths in the first year and a 21 percent increase in subsequent years. For black women, these subsequent years of a total abortion ban would lead to a 33 percent increase in maternal deaths, according to these projections.

According to the Centers for Medicare & Medicaid Services, health care spending in the US grew to \$4.3 trillion in 2021. Hospital-related services accounted for more than 31 percent, or \$1.3 trillion, of 2021 health care spending.

Private ownership of the giant health care chains, the pharmaceutical industry and insurance companies dominates health care services in the US. The delivery of medical care is not organized to serve the needs of the population but to fill the pockets of hospital CEOs and the shareholders of health-related corporations.

The same politicians of both big business parties who have allowed well over a million people, by the official count, to die so far in the COVID-19 pandemic are equally guilty in allowing the woeful state and worsening of women’s health care.

Doctors, nurses and other health care workers who have chosen a livelihood dedicated to caring for and treating pregnant women are hamstrung in their efforts by private control of the health care industry—which leads to the closure of hospitals and the slashing of jobs and services.

Pregnancy and childbirth should be a joyous and fulfilling time for women and their families. But by the CDC’s own estimates, 990 of the 1,178 maternal deaths in 2021 were preventable. Millions more pregnant women are denied prenatal and postpartum care due to poverty and lack of services in the counties where they live. Only the fight for genuine socialized medicine can begin to address this travesty.



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