



Preventing Maternal Mortality

March of Dimes strongly supports H.R. 1318, the Preventing Maternal Deaths Act, and S. 1112, the Maternal Health Accountability Act.

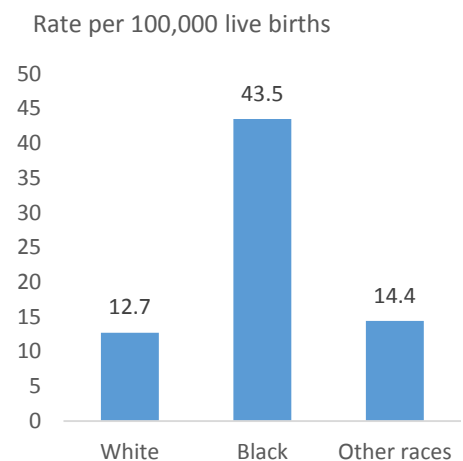
Maternal mortality

Maternal mortality includes deaths due to causes related to or aggravated by pregnancy or pregnancy management. It excludes deaths occurring more than 42 days after the end of pregnancy and deaths of pregnant women due to external circumstances (e.g. injury.) After a period of marked decline, the U.S. maternal mortality rates has increased since the 1980s.

The U.S. maternal mortality rate is 17.3 deaths per 100,000 live births. However, there are significant racial disparities in death rates among pregnant women and new mothers. The maternal mortality rate for non-Hispanic black women is 43.5 per 100,000 live births, versus 12.7 for white women.

March of Dimes is engaged in a wide range of policy and programmatic initiatives aimed at reducing maternal mortality.

Maternal mortality rates by race
United States, 2011-2013 Average



Preventing maternal mortality

March of Dimes strongly supports both H.R. 1318, the Preventing Maternal Deaths Act, and S. 1112, the Maternal Health Accountability Act. These bills would support states in establishing or improving maternal mortality review committees (MMRCs), to examine every case of maternal death in order to identify causes and patterns. These committees, comprised of experts in maternal, infant and public health, would then make recommendations to policymakers on how to prevent future maternal deaths in the state.

These bills are supported by a wide range of other organizations, including the American College of Obstetricians and Gynecologists, the American Academy of Family Physicians, and the Preeclampsia Foundation.

March of Dimes urges all Members of Congress to cosponsor and support H.R. 1318 and S. 1112.