



SB0356 – Health – Maternal Mortality Review Program – Reporting Requirement
Presented to the Hon. Dolores G. Kelley and members of the Senate Finance Committee.
February 14, 2019, 1:00 p.m.

POSITION: SUPPORT

NARAL Pro-Choice Maryland **urges the Senate Finance Committee a favorable report on SB0356**, Health – Maternal Mortality Review Program – Reporting Requirement, sponsored by Senator Shirley Nathan-Pulliam.

Our organization is an advocate for reproductive health, rights and justice. Maternal and child health are critical components to reproductive freedom and ensuring healthy individuals and families in Maryland. Despite a significant global decline in maternal mortality, the rate in the United States has increased since the 1990s. Maternal health is a strong standard for overall well-being and quality of life in a nation, and the alarmingly high rates in our country signify unhealthy conditions. From 2009 to 2013, the maternal mortality rate increased from 20.6 to 25.4 per 100,000 live births.¹

Further, data has repeatedly demonstrated that there are disparities among different racial groups. The maternal mortality rate among Black women in 2009 was 46.7 per 100,000 live births, in comparison to the 15.9 for Non-Hispanic Whites and the 20.6 for the general population. Black women also saw the highest increase in maternal mortality, from the 46.7 in 2009 to 56.3 in 2014.

These major disparities could be contributed to several factors. Firstly, women of color are more likely to experience economic marginalization, which can lead to low insurance coverage and poor health outcomes. Also, the daily institutional and interpersonal effects of racism cause what public health experts refer to as “allostatic load”, or a stress on the body—in other words, racism causes higher stress and tension for people of color, which can lead to health problems.² Another potential cause may be physician discrimination of patients of color, which can include doctors assuming that their Black patients are overreacting when they report abnormal symptoms and can lead to underdiagnosis and failure to treat.³ All of these factors combined may impact pregnant women of color, particularly Black women.

The first step toward reducing maternal mortality in Maryland is understanding the issue in full. Maternal mortality is an issue that must be studied from a racial perspective. It is critical to recognize that women with different identities navigate their pregnancies differently. Without a racial breakdown, the national data show that the maternal mortality rate is 25.4, which may not seem like an alarming rate. However, this number glosses over the experiences of Black women, whose maternal mortality rate is over 30 points higher.

SB0356 is an important bill because it addresses these national disparities and works to accomplish a critical first step for reducing maternal mortality rates across the board. We have to research and analyse the disparities in our state in order to work towards a healthier, more equitable Maryland.

We strongly support this effort to protect the rights, health, and dignity of all women. For these reasons, **NARAL Pro-Choice Maryland urges a favorable report on SB0356**. Thank you for your time and consideration.

¹ Macdorman, M. F., Declercq, E., & Thoma, M. E. (2017). Trends in Maternal Mortality by Sociodemographic Characteristics and Cause of Death in 27 States and the District of Columbia. *Obstetrics & Gynecology*, 129(5), 811-818. doi:10.1097/aog.0000000000001968

² Price, J. H., Khubchandani, J., Mckinney, M., & Braun, R. (2013). Racial/Ethnic Disparities in Chronic Diseases of Youths and Access to Health Care in the United States. *BioMed Research International*, 2013, 1-12. doi:10.1155/2013/787616

³ Racial bias in pain assessment and treatment recommendations, and false beliefs about biological differences between blacks and whites