

## MATERNAL MORTALITY IN THE US: THE ROLE OF WIC IN ADDRESSING THE CRISIS

## **NWA'S MISSION**

The National WIC Association (NWA) provides its members with tools and leadership to expand and sustain effective nutrition services for mothers and young children.

THE MATERNAL MORTALITY RATE MEASURES THE INSTANCES OF MATERNAL DEATHS PER 100,000 LIVE BIRTHS.<sup>1</sup>

## MATERNAL MORTALITY

- The United States has the highest maternal mortality rate of any industrialized country—26.4 deaths per 100,000 live births in 2015.
- » In other industrialized countries, the maternal mortality rate has been steadily decreasing, while in the US it is alarmingly increasing (See Figure 1).
- This rate is significantly higher for black women (see Figure 2).
- » One study found that 46% of African American women's pregnancy-related deaths were potentially preventable, compared to 33% of white women's.<sup>2</sup>
- » Low-income women and women in rural areas are more likely to die during pregnancy.<sup>3</sup>

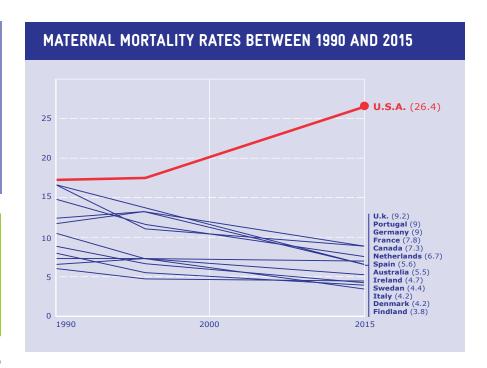


FIGURE 1. Source: Chart originally published online: https://www.npr.org/2017/05/12/528098789/u-s-has-the-worst-rate-of-maternal-deaths-in-the-developed-world. Data for this chart: GBD 2015 Maternal Mortality Collaboration. (2016) "Global, regional, and national levels of maternal mortality, 1990–2015: a systematic analysis for the Global Burden of Disease Study 2015," *The Lancet*. Volume 388, pp.1775-812. Accessed online: http://www.thelancet.com/pdfs/journals/lancet/PIIS0140-6736(16)31470-2.pdf.

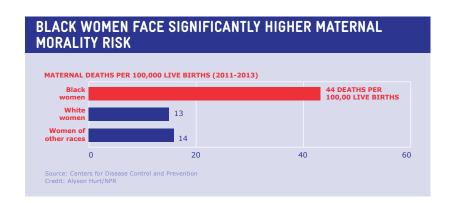


FIGURE 2. Maternal deaths per 100,000 live births (2011-2013) in Black women compared to White women and women of other races. Source: Martin N (2017) Black Mothers Keep Dying After Giving Birth. Shalon Irving's Story Explains Why. National Public Radio. Accessed online: https://www.npr.org/2017/12/07/568948782/black-mothers-keep-dying-after-giving-birth-shalon-irvings-story-explains-why.



## MATERNAL AND INFANT MORTALITY ARE INTERRELATED

- A mother's health can play a protective or harmful role during pregnancy. Chronic health conditions such as hypertension and diabetes put both a pregnant woman<sup>4</sup> and her baby<sup>5</sup> at risk for complications and death.
- Maternal and infant mortality disproportionately affect low-income and black families. For example, in Washington, DC, the infant mortality rate in Ward 8, where half of all children live in poverty, is ten times higher than the infant mortality rate in Ward 3, the wealthiest ward of the city. In Washington, DC, black women are also three to four times more likely to die during pregnancy and childbirth than white women.
- » Discrimination, racism, and stress are all linked to inequities in maternal and infant mortality. 89

## WHAT IS WIC DOING?

WIC helps to address maternal mortality through its suite of services and relationship with community stakeholders.

#### **COMMUNITY PARTNERSHIPS**

WIC helps to address maternal mortality by participating in the community through forming partnerships, hosting events, and conducting outreach. WIC staff are also often members of the community. Additionally, WIC clinics often build partnerships with local birthing hospitals and OBs to better coordinate and support women during pregnancy, which allows for the provision of continuity of care. This also helps pregnant women with expectations for care in the hospital during delivery.

#### **HEALTH ASSESSMENTS**

WIC appointments involve health assessments that serve to identify existing health conditions during pregnancy while also connecting women with primary providers (OB) to assist in managing conditions during pregnancy.

#### **BREASTFEEDING**

WIC educates participants to help ensure successful breastfeeding thereby creating strong motherinfant bonds while also providing early support of maternal health postpartum.

## BREASTFEEDING PEER COUNSELING

WIC's Breastfeeding Peer Counseling program connects women with peers in the community prenatally and postpartum for breastfeeding support and other nutrition education such as group classes.

## NUTRITION EDUCATION SERVICES

Individual nutrition assessments and counseling are provided during the WIC appointment to meet the woman's goals and interests. Support for healthy weight gain during pregnancy and postpartum, including the interconception period, are provided as well. Because these services are provided at no cost, WIC removes and reduces the barriers and challenges that low-income pregnant women often experience when receiving services.

## REFERRALS TO HEALTHCARE AND SOCIAL SERVICES

WIC provides referrals to preventive health and social services while also following up with participants. WIC plays a vital role in bringing attention back to the mother and providing the necessary referrals. WIC's referral services help to improve prenatal and maternal health, specifically through its provision of substance abuse and counseling, shelter, and housing referrals.

## WHAT IS NWA DOING?

NWA has embarked on a number of initiatives to help address maternal mortality.

#### **NWA IN THE STATES**

In 2018, NWA launched the "NWA in the States" series to encourage further dialogue among WIC staff and community partners on how to elevate WIC's role in the broader public health response to infant and maternal mortality. The series seeks to mobilize WIC clinic staff in addressing these health issues, highlight promising local and statewide practices, and enhance WIC's connections to coalitions and partnerships.

## MATERNAL MORTALITY TASK FORCE

NWA's Maternal Mortality Task Force was convened to examine available evidence regarding WIC participation and maternal mortality to identify promising practices for helping to address the issue in WIC. Specific duties include examining opportunities and avenues through which referrals and education around birth can be provided in WIC appointments to increase knowledge surrounding maternal mortality, considering funding opportunities for possible pilots in WIC local agencies, and drafting a position paper on WIC's role in reducing maternal mortality.

#### POSITION PAPERS

NWA's Maternal Mortality Task Force has assumed the responsibility of authoring a maternal mortality in WIC position paper that will outline the role that WIC plays in addressing maternal mortality. The Task Force hopes to release a final draft by early April 2019.

### MATERNAL MORTALITY ONE-DAY CONFERENCE

To begin the conversation of WIC's role in addressing maternal mortality with WIC staff outside the Maternal Mortality Task Force, NWA hosted a one-day maternal mortality conference



in September 2018. Eighty state and local WIC staff from around the country attended the conference and heard from leading maternal health researchers, reproductive and birthing justice advocates, community birthing providers, and obstetric providers about the current maternal mortality landscape in the US and how diverse stakeholders are combating the crisis. Conference attendees took what they learned from these experts and, leveraging their WIC expertise, identified tangible next steps for WIC agencies to take in expanding WIC's role in preventing maternal deaths. The learnings from this conference will be integrated in to the Maternal Mortality Task Force's position paper as well as future educational opportunities on the topic of maternal mortality offered by NWA.

#### **LEGISLATION**

NWA actively engages policymakers to craft effective legislation or build upon existing policy to support public health efforts that address maternal mortality. WIC can play a larger role in addressing maternal mortality, and NWA has advocated for legislation that recognizes WIC's role in the broader public health response

THE PREVENTING MATERNAL **DEATHS ACT,** sponsored by Rep. Jaime Herrera Beutler (R-WA) and Sen. Heidi Heitkamp (D-ND), was signed into law in December 2018. The law authorizes a new grants program to increase federal funding for state maternal mortality review committees, which faced funding shortfalls or have been disbanded in many states as a result of budget cuts. NWA had endorsed this legislation and is encouraged to see renewed interest in investing in maternal mortality review committees. NWA urges all states to include WIC in these review committees.

MOTHERS AND OFFSPRING MORTALITY AND MORBIDITY **AWARENESS** is sponsored by Rep. Robin Kelly (D-IL) and Sen. Dick Durbin (D-IL). The bill includes a number of provisions to extend Medicaid coverage for postpartum women, standardizing data collection. facilitating the sharing of best practices between practitioners and hospital systems, and improving access to culturally competent care. The most recent Senate version included a proposal to extend WIC certification for postpartum women until two years, a crucial step toward supporting new mothers and averting pregnancy-related deaths. NWA endorsed the last introduced version in the 115th Congress and will continue to advocate for passage of these commonsense proposals.

## ALLIANCE FOR INNOVATION ON MATERNAL HEALTH (AIM)

NWA is a partner and active participant in AIM, a national, crosssector commitment to promote safe maternal care for every US birth, lowering the high US rates of maternal mortality and morbidity. This is achieved through the engagement of multi-disciplinary partners at the national, state, and hospital levels who together develop and implement maternal safety bundles, utilizing data-driven continuous qualityimprovement strategies. This crosssector collaboration of partners aligns existing efforts and develops resources to support a national evidence-based standard approach to improving maternal care.

## WITH LEGISLATIVE SUPPORT, WIC CAN DO MORE TO HELP

WIC, which serves approximately 1.7 million low-income women each month, 10 is well-positioned to play a bigger role in the national conversation around solutions to this crisis. Specifically, NWA advocates for WIC to be a mandatory participant on state Maternal Mortality Review Committees. In states where WIC has been a part of Maternal Mortality Review Committees and other interagency collaborations, members report that WIC has been able to provide unique data and perspective to inform decision-making. WIC is also a key messenger to pregnant and postpartum women and has been able to collaborate with other state agencies on public health education campaigns. In order to ensure WIC is able to actively participate in addressing this crisis, NWA recommends:

- » ensuring WIC is a mandatory participant on state Maternal Mortality Review Committees and other collaborative efforts to address maternal mortality.
- » ensuring WIC providers are given access to training relevant to addressing maternal mortality, including implicit bias training. This should occur both through education and training programs for registered dietitians, international board certified lactation consultants, and certified lactation consultants, and through continuing education opportunities for WIC staff.



WIC, SERVING ALMOST 2 MILLION LOW-INCOME PREGNANT AND POSTPARTUM WOMEN AND NEARLY 2 MILLION INFANTS EACH MONTH, HAS AN INDISPENSABLE ROLE TO PLAY IN HELPING MOTHERS RECOGNIZE KEY RISK FACTORS ASSOCIATED WITH MATERNAL AND INFANT MORTALITY.

# WIC: EMPOWERING FAMILIES, STRENGTHENING COMMUNITIES

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