

WREN

Women's
Rights &
Empowerment
Network

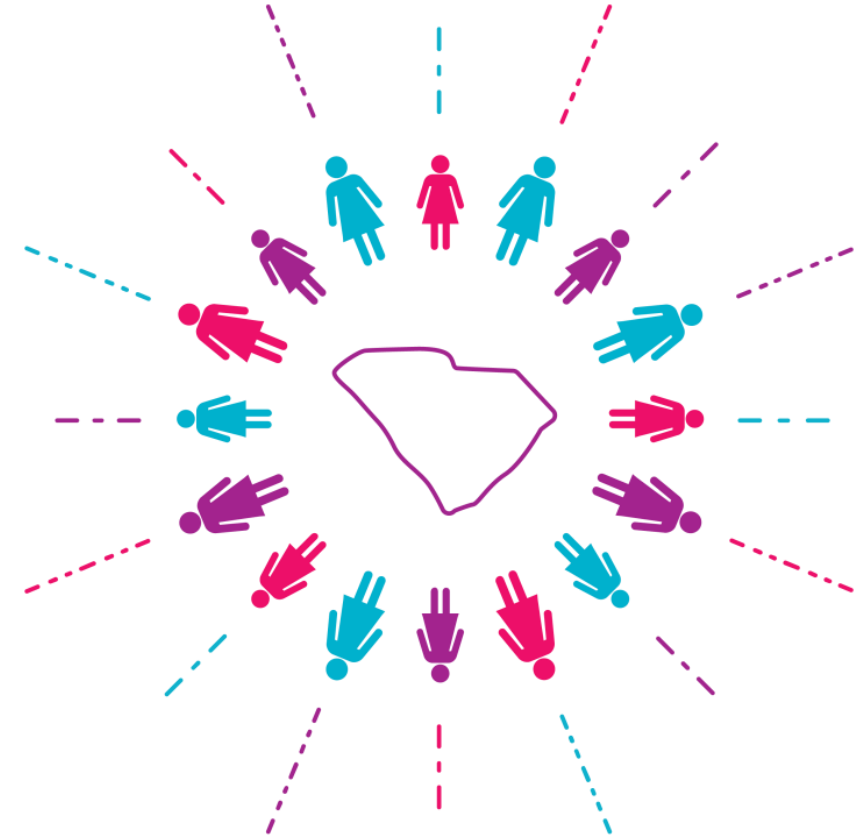
Insight to Action

Advancing Maternal Health in
South Carolina



WREN aims to be the voice for South Carolina's women and girls by:

- Advocating for better policies
- Educating and mobilizing people
- Engaging individuals and organizations
- Building coalitions



Holistic Approach

- Education
- Employment
- Reproductive Rights
- Freedom from Violence
- Workplace Equity
- **Maternal Health**
- Leadership
- Civic Engagement



Racial Disparities in Maternal Health

Nationally, compared to white women, the pregnancy-related mortality ration is:

- More than 3x higher in black women
- 2.5x higher in American Indian/Alaska Native women
- Slightly higher in Asian/Pacific Islander women

Petersen EE, Davis NL, Goodman D, et al. *Vital Signs: Pregnancy-Related Deaths, United States, 2011-2015, and Strategies for Prevention, 13 States, 2013-2017*. MMWR Morb Mortal Wkly Rep 2019;68:423-429. DOI: https://dx.doi.org/10.15585?mmwr.mm6818e1external_icon

Pregnancy-related Deaths for 2011-2015:



31% while pregnant



33% 1 week to 1 year postpartum

36% at deliver or in the week after

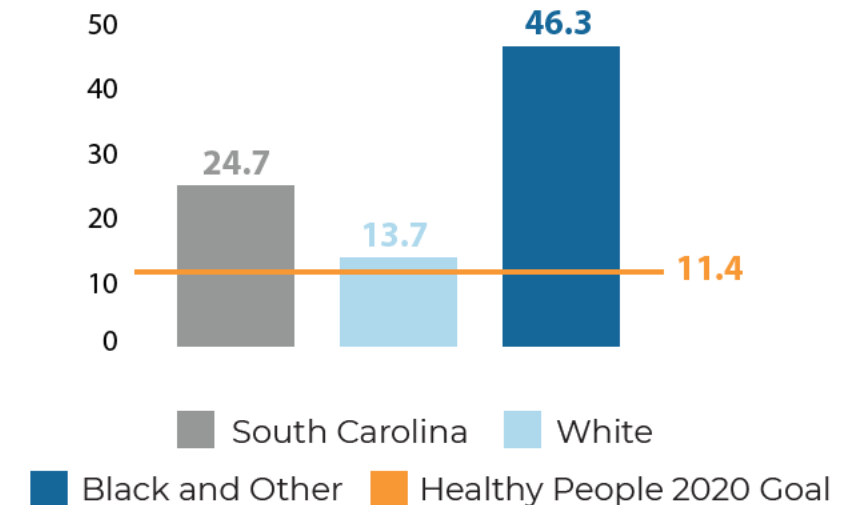


Racial Disparities in Maternal Health

Compared to the previous five-year period, the rate of pregnancy-related death increased among minority populations and in South Carolina overall.

South Carolina Pregnancy-Related Death by Race, 2013-2017²

Rate per 100,000 live births



Vital Statistics (2018, November). South Carolina Vital and Morbidity Statistics 2017. Retrieved from: https://scdhec.gov/sites/default/files/media/document/Vital-Morbidity-Statistics_2017.pdf

Pregnancy Related Death

Common Causes:

- Cardiovascular and coronary conditions
- Hemorrhage
- Infection
- Embolism

Other Factors:

- Access to care
- Missed or delayed diagnoses
- Not recognizing the warning signs

Pregnancy-related Deaths | VitalSigns | CDC. (n.d.). Retrieved from <https://www.cdc.gov/vitalsigns/maternal-deaths/index.html>

All women have the right to safe and respectful maternal health care that supports healthy pregnancies and births.

-Black Mamas Matter Alliance

SC Maternal Mortality and Morbidity Review Committee

Goals: MMMR

- Determine the annual number of pregnancy-associated deaths that are pregnancy related.
- Identify trends and risk factors among preventable pregnancy-related deaths.
- Develop actionable strategies for prevention and intervention.

Policies that Impact Maternal Health

Enacted: Pregnancy
Accommodations Act

May 18, 2018

Pending: Lactation Support Act

H.3200



Policies that Impact Maternal Health

Birth Spacing

12 Month Supply of Birth Control Act (H.3279 & S.187)

- Ensures insurance coverage of a 12 month supply of birth control at one time.

Contraceptive Coverage for State Employees (Proviso)

- No cost sharing for contraception for state employees

Dignity with Pregnancy

Anti-Shackling of a Pregnant Person (H. 3967)

- Bans the use of restraints for an incarcerated person who is pregnant

Policies that Impact Maternal Health

Restrictions on Care

- 6 Week Abortion Ban (H. 3020)
 - Oversimplifies pregnancy
 - Criminalizes doctors
 - Drives healthcare providers out of state
 - Threatens accreditation of medical schools



Where do we go from here?

- Adequately fund and support the work of the SC MMR Committee.
- Address the obgyn workforce shortage, esp in our rural areas.
- Train providers to address racism and build a more diverse workforce.
- Expand access to health care coverage.
- Ensure all workers have access to paid family and medical leave and paid sick leave.

Where do we go from here?

- Ensure all workers earn a living wage.
- Make child care affordable and accessible.
- Protect against harmful environmental factors.
- Have real conversations and action around systemic racism.
- **Trust Women.**

Take Action & Stay Connected

- Join the network at www.scwren.org
- Social media: @WRENnetwork
- Text “**WREN**” to 52886