

Key Morbidity & Mortality Trends Impacting Black Mothers During Delivery

New in-hospital trends data shows: Maternal mortality in the hospital, at the time of delivery, continues to decline – and especially among Black women. But instances of harm continue to rise.

According to the [latest analysis](#) from healthcare improvement and technology company Premier Inc.:

- **55% decrease in maternal deaths during hospital delivery for Black women** from 2008-2019 – suggesting the disparity gap between Black and white women for delivery-related deaths has substantially narrowed.

55%

Higher SMM rate for Black women compared to white women from 2008-2019

- U.S. hospitals showed a 17% decrease in delivery-related maternal deaths for all races between 2008-2019, indicating hospitals are making progress at the time of delivery.

- **Severe maternal morbidity (SMM) continues to rise and disproportionately affects Black women**, who have an 84% higher SMM rate than white women.

84%

Higher SMM rate for Black women compared to white women from 2008-2019

- The SMM rate for Black women from 2008-2019 was 271.6, compared to the overall SMM rate of 173.4, per 10,000 births.
- The greater instances of SMM are a likely indicator of post-discharge maternal mortality, with CDC data showing that the mortality rate within 42 days of pregnancy increased 15% between 2018 and 2019.

- Black women have **higher rates for heart failure, ARDS, eclampsia, acute renal failure, sepsis and blood transfusions.**

- Blood loss and other complications that require transfusions are the leading indicator of SMM and are linked to a higher likelihood of mortality.

These findings underscore the need for a standardized method to collect maternal-infant data, measure outcomes, adjust care and scale proven practices across hospitals nationwide.

The U.S. Department of Health and Human Services [Office of Women's Health](#) (OWH) and Premier are doing just that. Here's how:

1. OWH is leveraging Premier's standardized data representing 25% of U.S. births to **analyze the risk factors** influencing maternal-infant morbidity and mortality.
2. We are **uniting a cohort of 200+ hospitals** across the country – particularly those that serve vulnerable populations – to **reduce health disparities; scale standardized, evidence-based practices; and reliably measure associated outcomes.**
3. We're working with partners like MoMMA's Voices and the National Birth Equity Collaborative to incorporate all perspectives – creating a **continuous feedback loop between mothers and providers** in and out of the hospital.
4. We are taking steps to **better connect the inpatient and ambulatory care** mothers and infants receive to get at another unexplored problem area.

With data, evidence and insights from hospitals, outpatient settings and mothers, Premier and OWH's efforts will reduce harm and deaths – and make the U.S. the safest place to have a baby.

Download Premier's full analysis of maternal and infant health trends: bit.ly/PremierTrends