



## **Racial/Ethnic Disparities in Pregnancy-Associated Death: The Critical Importance of Disaggregation by Cause of Death and Race/Ethnicity**

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Racial/ethnic disparities in perinatal health outcomes are among the most widely recognized, long-standing health inequities in the United States, with more than double the rate of pregnancy-related mortality among non-Hispanic Native Hawaiian or Other Pacific Islander (NHOPI; 62.8 deaths per 100 000 live births), non-Hispanic Black (39.9), and non-Hispanic American Indian or Alaska Native (AIAN; 32.0) individuals than among non-Hispanic White individuals (14.1). Given that 84% of pregnancy-related deaths are preventable, efforts to better understand and prevent maternal death are critical for improving health equity.

Studies have reported large increases in the rates of pregnancy-related death over the past several decades; however, a pivotal evaluation from the National Center of Health Statistics, which maintains a centralized database of all death certificates in the United States, indicated that much of the recent increase in maternal mortality was largely the result of improvements in data collection because of the addition of the pregnancy checkbox on the revised standard certificate of death in 2003. Despite the likelihood that the staggered introduction of the checkbox artificially amplified documented increases in maternal mortality, all states adopted the checkbox by 2017. The most recent analyses from the Centers for Disease Control and Prevention indicated an annual increase in the maternal mortality rate from 2018 to 2021 overall and for all three races/ethnicities studied, with larger increases for non-Hispanic Black and Hispanic individuals than for non-Hispanic White individuals.