



# Board of Commissioners of Cook County

118 North Clark Street  
Chicago, IL

## Legislation Text

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**File #:** 23-2260, **Version:** 1

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### **PROPOSED RESOLUTION**

#### **CALLING FOR A HEARING OF THE HEALTH AND HOSPITALS COMMITTEE TO EXAMINE MATERNAL HEALTH MORBIDITY AND MORTALITY RATES IN COOK COUNTY**

**WHEREAS**, each year in the U.S., hundreds of women die from complications related to pregnancy and childbirth, known as maternal death; and

**WHEREAS**, a maternal death is defined by the World Health Organization (WHO) as “the death of a woman while pregnant or within 42 days of termination of pregnancy, irrespective of the duration and the site of the pregnancy, from any cause related to or aggravated by the pregnancy or its management, but not from accidental or incidental causes; and

**WHEREAS**, last year the United States Government Accountability Office undertook an analysis of Centers for Disease Control and Prevention (CDC) data due to the COVID-19 pandemic, which presented challenges for maternal health, as pregnant women with COVID-19 are more likely to experience pregnancy complications, severe illness, or death; and

**WHEREAS**, CDC data shows that maternal deaths increased during the COVID-19 pandemic and COVID-19 was a contributing factor in one quarter of all maternal deaths in 2020 and 2021 combined; and

**WHEREAS**, Health and Human Services officials and stakeholders said the pandemic worsened factors contributing to maternal health disparities, like access to care, cardiovascular problems and other underlying conditions, which contributed to a 78% rise in maternal mortality rates in the U.S. between 2000-2020 according to the WHO; and

**WHEREAS**, in 2021, the U.S. had one of the worst rates of maternal mortality in the country's history going back to 1965. 1,205 people died of maternal causes in the U.S. in 2021, which represents a 40% increase from the previous year, and the U.S. rate for 2021 was 32.9 maternal deaths per 100,000 live births, which is more than ten times the estimated rates of some other high-income countries, including Australia, Austria, Israel, Japan and Spain which all reported between 2 and 3 deaths per 100,000 in 2020; and

**WHEREAS**, according to the CDC, cardiovascular conditions such as pulmonary embolisms, uncontrolled bleeding and problems emanating from hypertension are the leading cause of pregnancy-related deaths in the U.S. and sadly most maternal deaths are preventable, as the health-care solutions to prevent or manage complications are well known; and

**WHEREAS**, the maternal death rate for Black or African American women was 44.0 per 100,000 live births in 2019, then increased to 55.3 in 2020, and 68.9 in 2021. In contrast, White (not Hispanic or Latina) women had death rates of 17.9, 19.1, and 26.1, respectively; and

**WHEREAS**, the maternal death rate for Hispanic or Latina women was lower 12.6 per 100,000 live births compared with White (not Hispanic or Latina) women 17.9 in 2019, but increased significantly during the pandemic in 2020 to 18.2 and in 2021 to 27.5; and

**WHEREAS**, Illinois has maternal death statistics even higher than the national average with Black women in Illinois six times as likely to die of a pregnancy-related condition than white women; and

**WHEREAS**, disparities in other adverse maternal outcomes, such as preterm and low birthweight births and severe

maternal morbidity, which represents a group of potentially life-threatening unexpected maternal conditions or complications that occur during labor and delivery that may cause long-lasting health problems that extend beyond the pregnancy, persisted for Black or African American women; and

**WHEREAS**, well before the Covid-19 pandemic, the Illinois Maternal Morbidity and Mortality Report 2016-2017 released in 2021 documented Illinois's severe maternal morbidity rate for 2016-2017 was 75.4 per 10,000 deliveries or about 1 in 150 women who delivered a baby experienced a severe maternal morbidity, and Black women had the highest rate of severe maternal morbidity in Illinois during that time frame with a rate of 132.4 per 10,000 deliveries, which was more than two times as high as the rate for White women. Hispanic and Other race women had rates of severe maternal morbidity that were approximately 20% higher than White women; and

**WHEREAS**, Cook County Health (CCH) and the Cook County Department of Public Health (CCDPH) have been actively studying and trying to improve maternal morbidity and mortality rates and the health disparities that contribute to adverse pregnancy outcomes; and

**WHEREAS**, a public hearing of the Health & Hospitals Committee is the ideal platform to bring together stakeholders from CCH, CCDPH and other healthcare providers to address these matters and discuss solutions to improve maternal morbidity and mortality rates in Cook County;

**NOW THEREFORE BE IT RESOLVED**, that the Cook County Board of Commissioners does hereby request a public hearing be held to bring together key maternal health stakeholders in order to fully understand the factors leading to high maternal morbidity and mortality rates; and

**BE IT FURTHER RESOLVED**, that representatives from Cook County Health, the Cook County Department of Public Health, the Illinois Department of Public Health, outside healthcare providers and any other pertinent stakeholder representatives appear before the Health & Hospitals Committee and be prepared to give an overview to the committee and answer questions related to maternal health overall as well as disparities in maternal morbidity and mortality rates in Cook County; and

**BE IT FURTHER RESOLVED**, that each stakeholder be prepared to provide data on such rates and the factors that have contributed to them; and

**BE IT FURTHER RESOLVED**, that each stakeholder be prepared to provide short and long-term recommendations to prevent pregnancy related deaths and improve maternal morbidity and mortality rates in Cook County.