



## Testimony before the Public Health Committee

Regarding SB 304 AN ACT ESTABLISHING A MATERNITY MORTALITY REVIEW COMMITTEE WITHIN THE DEPARTMENT OF PUBLIC HEALTH.

Good afternoon Co-Chairs Gerratana, Somers, and Steinberg and members of the Public Health Committee. My name is Tekisha Dwan Everette, I am submitting this testimony as the Executive Director of Health Equity Solutions. Health Equity Solutions, is a non-profit organization with a state-wide focus on promoting policies, programs, and practices that result in equitable health care access, delivery, and outcomes for all people in Connecticut. Our vision is for every Connecticut resident to obtain optimal health regardless of race, ethnicity, or socioeconomic status.

Health Equity Solutions is in support of SB 304, which would establish within the Department of Public Health a maternal mortality review panel for the purposes of identifying factors associated with maternal death and making recommendations for improvements to the provision of health care services to women. According to the Center for Disease Control Pregnancy Mortality Surveillance System data, there are considerable racial disparities in pregnancy related mortality. During 2011-2013, which is the most recent data available, the pregnancy mortality ratios were 43.5 deaths per 100,000 live births for black women, whereas there were 12.7 and 14.4 deaths per 100,000 live births for white women and women of other

races respectively<sup>1</sup>. It is imperative we act to ensure that this disparity is eliminated and further that we act to make sure that in this day and age, given our advances in health, that no mother dies unnecessarily at birth in our state.

I would be remiss in not mentioning the data we used in this testimony is five years old and did not provide specific subgroup population data. This example shows the critical importance of collecting and reporting race, ethnic, and primary language data in a timely and actionable manner inclusive of subgroup populations. To adequately address health disparities, like maternal mortality rates, we need to track and report data on racial and ethnic groups and subgroup populations, in a timely, actionable, and standardized manner. Our proposal on race, ethnic, and primary language data has been submitted and distributed to the public health committee and we look forward to the opportunity to discuss this further.

Thank you for your time and consideration.

<sup>1</sup> Center for Disease Control (2017). Reproductive Health: Pregnancy Mortality Surveillance System. Retrieved from <https://www.cdc.gov/reproductivehealth/maternalinfanthealth/pmss.html>