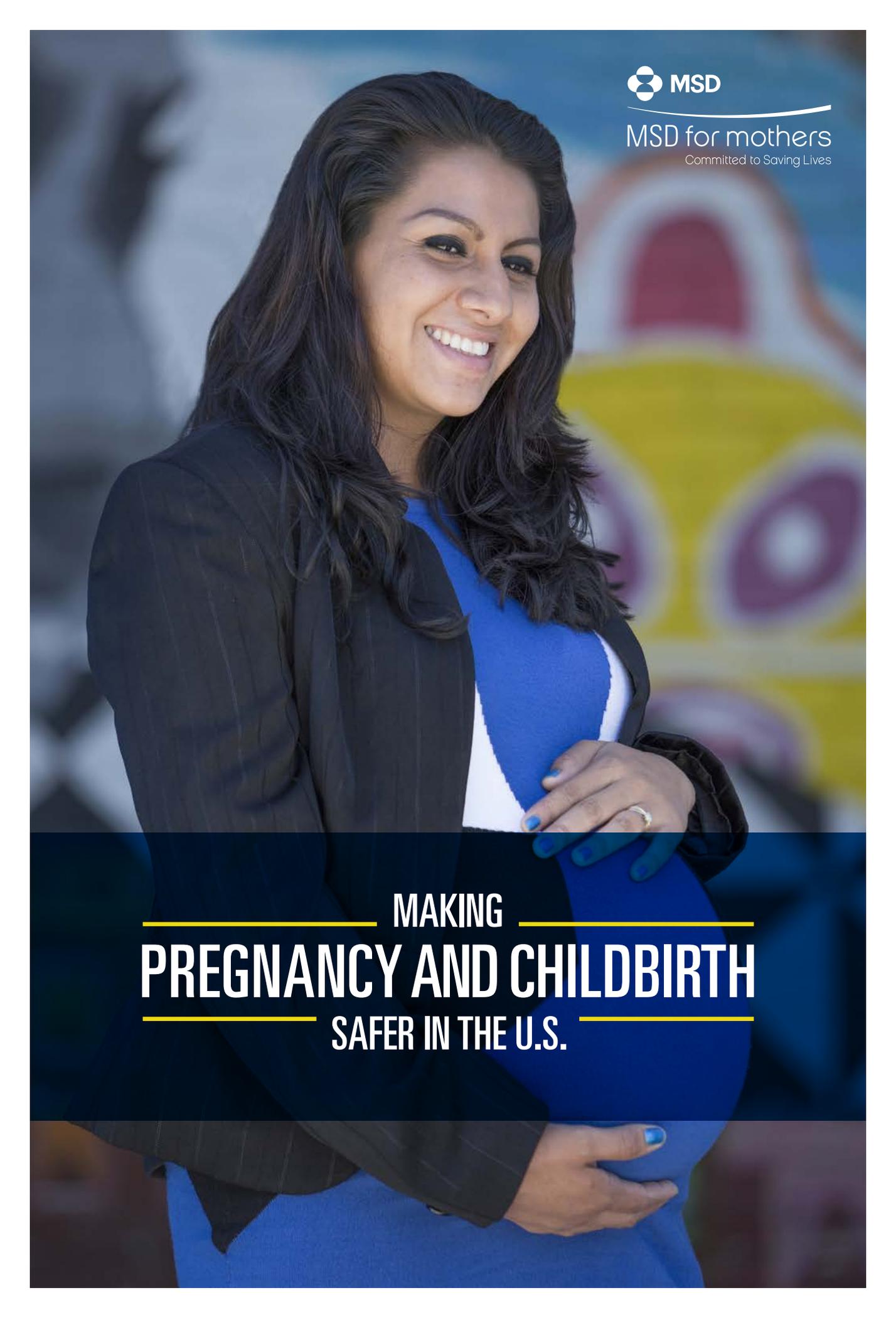




MSD for mothers
Committed to Saving Lives

A woman with long, dark, wavy hair is smiling warmly at the camera. She is wearing a black blazer over a blue and white top. Her hands are gently resting on her pregnant belly. The background is a soft-focus pattern of colorful circles in shades of blue, yellow, and purple.

MAKING
PREGNANCY AND CHILDBIRTH
SAFER IN THE U.S.

MESSAGE FROM LEADERSHIP

Here in the U.S., we pride ourselves on being a global leader in health care delivery, offering the highest caliber technology, research and services. Yet right now we rank 46th in the world in maternal mortality, lagging behind almost every other developed nation. In fact, the U.S. is the only highly-developed country where deaths due to pregnancy or childbirth are increasing, according to the World Health Organization (WHO).

MSD for Mothers is helping save the lives of women during pregnancy and childbirth around the world. Given the troubling rise in maternal mortality in the U.S., we knew that we also needed to make childbirth safer for women here at home. That's why we are teaming up with nurse and physician associations, community leaders and other experts to prevent women from dying while giving life. We are proud to support these exceptional maternal health champions (see last page for full list).

We are working with policy makers, states, hospitals and local health organizations to improve the quality of emergency care during childbirth and get essential services to the most at-risk women.

We know that with improved health care practices and better data, we can reduce the risks in pregnancy and childbirth for the 4 million women who give birth in the U.S. each year. We believe the health care community can — and will — turn the tide on maternal deaths.

DR. NAVEEN RAO

Lead, *MSD for Mothers*

DR. PRIYA AGRAWAL

Executive Director, *MSD for Mothers*



MATERNAL DEATHS RISING IN THE U.S.

The U.S. is one of only a handful of countries in the world where maternal mortality is rising, not falling.

So what is going on? Better reporting, more cesarean sections and soaring rates of chronic conditions are contributing to the trend. With diabetes, obesity and hypertension on the rise among younger people, many women are in poor health when they become pregnant. Some are slipping through the cracks — not getting the care they need before, during and after giving birth.



MSD for Mothers is helping to reverse the trend. Our 10-year, \$500 million initiative harnesses MSD's scientific and business expertise to help end preventable maternal deaths worldwide. In the U.S., we are supporting efforts at the policy, hospital and community level to stop the preventable tragedy of women dying while giving life.

In hospitals, physician and nursing associations are working to ensure that mothers get timely emergency obstetric care. In 12 states, processes are now in place to find out why women are dying in pregnancy and childbirth so we can prevent future deaths. And in under-served communities, new models of care are helping pregnant women with chronic health conditions receive the care they need.

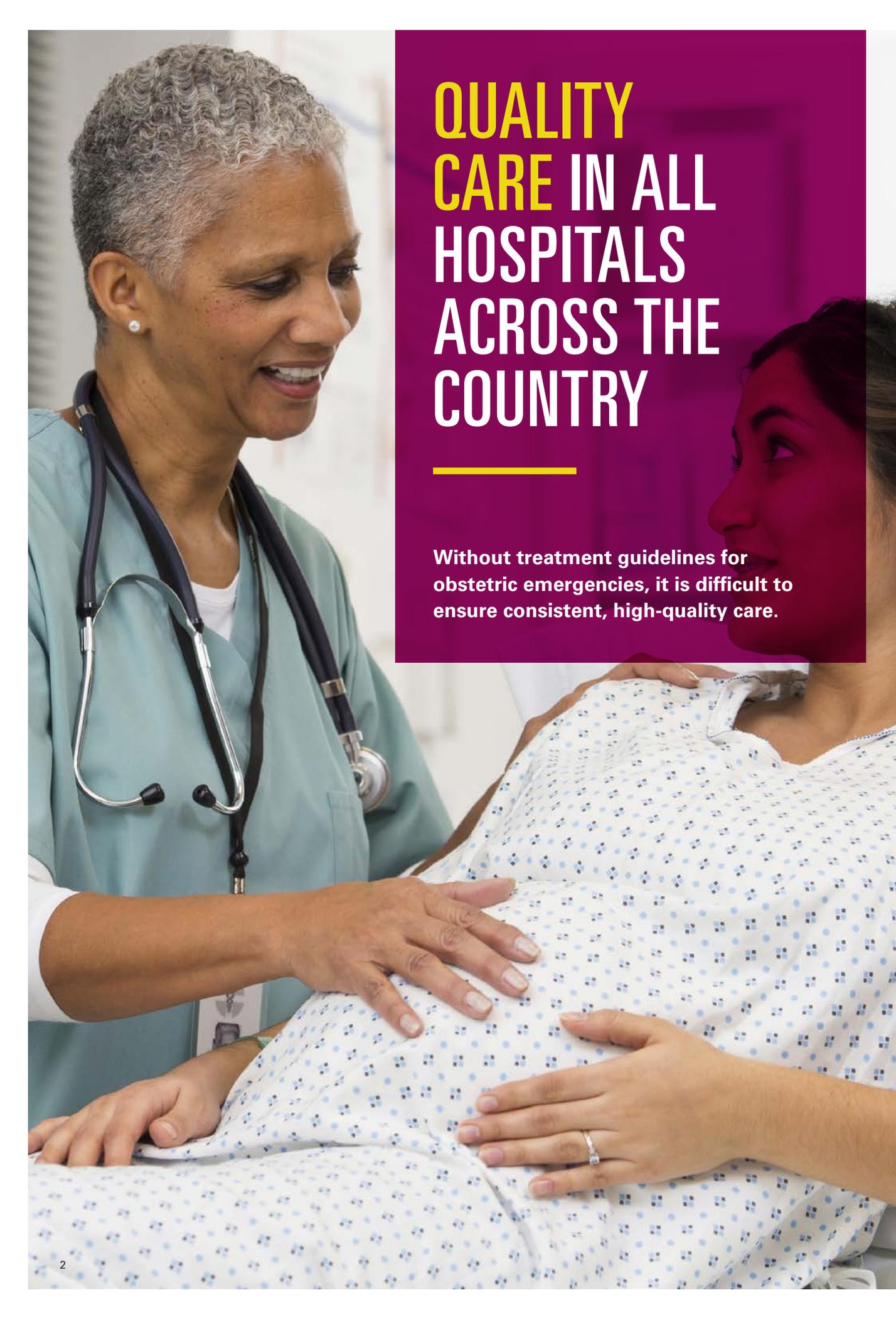
MSD for Mothers is also taking on an advocacy role — raising awareness about maternal deaths among women, families, healthcare providers and policy makers so that we can all take steps to end preventable maternal mortality.

46th IN MATERNAL MORTALITY

Women in the U.S. are more likely to die in pregnancy and childbirth than women in other high-income countries.

EVERY 10 MIN ONE WOMAN NEARLY DIES

Approximately 60,000 women each year nearly die during pregnancy and childbirth.



QUALITY CARE IN ALL HOSPITALS ACROSS THE COUNTRY

Without treatment guidelines for obstetric emergencies, it is difficult to ensure consistent, high-quality care.

MSD for Mothers supported leading U.S. physician and nursing organizations as they created and implemented “safety bundles” — sets of evidence-based tools and practices — to prevent and treat the three leading causes of maternal death in the U.S. More than 300 hospitals in five states now use these safety bundles to improve the quality of their emergency obstetric care.

MSD for Mothers is also partnering with the Association of Women’s Health, Obstetric and Neonatal Nurses to standardize the information nurses provide when they discharge new mothers from the hospital. The goal is to alert women and their families to the warning signs of a serious health problem so they can seek treatment immediately.

Together we are driving a culture shift among obstetricians, midwives and nurses to create an ethos of safety during and after delivery. Better coordination among all providers involved in obstetric care will help save more women’s lives.

DID YOU KNOW?

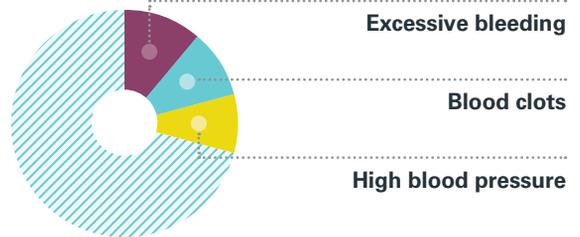


Nearly half of the maternal deaths in the U.S. are preventable



The majority of maternal deaths occur in the weeks after childbirth

SAFETY BUNDLES PREVENT AND TREAT LEADING CAUSES OF MATERNAL DEATH



Saving Lives in Georgia

Soon after delivering her baby in a Georgia hospital, Mary* began to bleed. Had the medical team not known what to do, she may have died.

“The problems started about an hour after giving birth,” recalled Tina Hayes, Obstetric Nurse Manager at Union General Hospital in Blairsville. “The patient was in bed nursing her newborn, and started to feel dizzy. She almost dropped the baby.” When the

nurse pulled back the covers, the bed was soaked in blood.

“If we hadn’t participated in the Postpartum Hemorrhage Project, it would have been complete chaos,” said Hayes.

The project, led by the Association of Women’s Health, Obstetric and Neonatal Nurses with support from *MSD for Mothers*, gives health providers new and improved tools to stop women from bleeding to death during or after childbirth.

Union General Hospital now has new guidelines and an action plan for managing this kind of emergency. Labor wards, recovery and operating rooms have also been equipped with hemorrhage carts, stocked with vital supplies and medications.

“Not only did we save the mother’s life,” said Hayes, “we responded so quickly that she didn’t have further complications and went home with her baby two days later.”

* Not her real name

A woman with brown hair, wearing teal scrubs, is looking down at a document she is holding. The background is a blurred medical setting with shelves of files. An orange overlay covers the top right portion of the image, containing text.

BETTER DATA TO PREVENT FUTURE DEATHS

Although we know that more pregnant women and new mothers are dying in the U.S., we need more information to understand why.

Unfortunately, we don't have accurate data to shed light on the problem of maternal mortality.

Only half of U.S. states review maternal deaths to find out why they happened. Without knowing why women are dying in pregnancy and childbirth, doctors and nurses can't adopt new methods to stop these deaths.

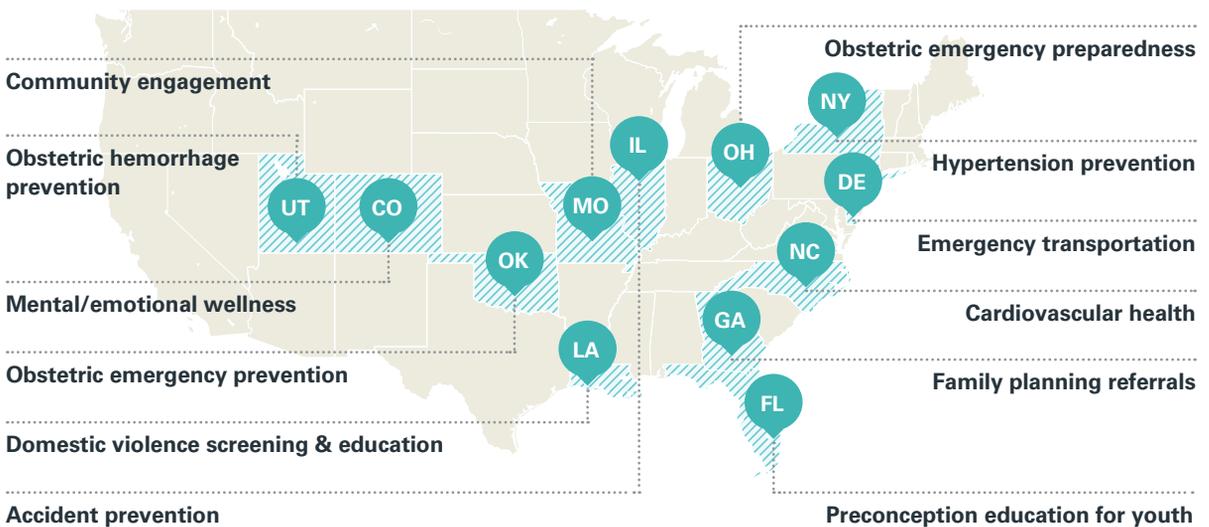
MSD for Mothers supported the Association of Maternal and Child Health Programs to help 12 states strengthen their reviews of maternal deaths and develop new policies to save lives. We are also working with the CDC Foundation to bring together states to share their data and learn from one another.

Our goal is that all 50 states examine every maternal death and act on their findings. When this happens, the U.S. will be able to better identify national trends, track progress and stimulate change in policy and clinical practice.

In New York City, we funded the nation's first citywide analysis of life-threatening complications during childbirth, known as severe maternal morbidity.

The findings were striking: approximately 2,500 women experience these serious complications each year, and Black women are three times more likely to be affected than White women.

NEW POLICIES TO SAVE WOMEN'S LIVES



Strengthening Maternal Mortality Surveillance in North Carolina

Although North Carolina has been collecting information about maternal deaths for years, a strengthened review process and more resources gave the state a boost to act on its findings.

"We've known for some time that heart disease is a leading cause of maternal mortality in our state," said Belinda Pettiford from North Carolina's Department of Health and Human Services.

"But with support for this new project, we were able to enhance our review process to connect the dots between maternal deaths and heart disease and develop a statewide educational campaign," she said.

The state's existing educational materials on heart disease specifically targeted an older population.

“We just weren't thinking that heart disease was happening to women of childbearing age," said Pettiford.

Now younger women are the focus of the state's new "Show Your Heart Some Love" campaign which promotes a healthy lifestyle to ensure that a healthy heart comes before pregnancy.



HEALTHIER COMMUNITIES WHERE WOMEN GET THE CARE THEY NEED

Many women are in poor health
when they become pregnant.

Pregnancy can motivate women to seek care and can give health providers a window of opportunity to encourage them to get healthy, especially if they have chronic conditions.

MSD for Mothers' three community partners are designing and testing new initiatives that bridge the gap between hospital and community, using community health workers to link women with chronic conditions to key primary and prenatal health services.

We are exploring whether this population health approach could ultimately cut costs by helping women stay healthy before, during and after their pregnancies.

DID YOU KNOW?

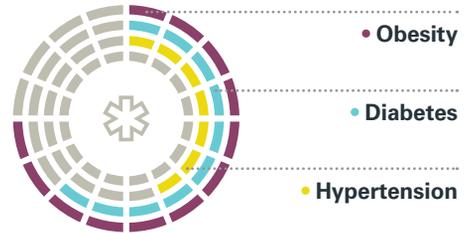


The proportion of women beginning pregnancy overweight or obese has nearly doubled in the last 20 years.



Black women are three to four times more likely to die in childbirth than White women.

RISING RATES OF CHRONIC CONDITIONS CONTRIBUTE TO MATERNAL MORTALITY



Stopping Women in New Jersey From Falling Through the Cracks

When Sharine Eliza, a community health worker in Camden, New Jersey, visited a young mother, she knew the woman wasn't getting what she needed. The 19-year-old, diagnosed with Asperger's Syndrome and diabetes, was pregnant with her second child only nine months after the first. She was labeled "difficult" by her providers.

"But there was so much more to her story," said Renee Murray, Associate Clinical Director of the Camden

Coalition of Healthcare Providers. "She is Spanish-speaking only, cannot read or write and her mother recently passed away."

With funding from *MSD for Mothers*, the Camden Coalition is improving care for women of childbearing age. The organization is sharing data among providers in order to connect patients with complex needs to care and sending community health workers to women's homes to make sure they receive vital services.

Through this project, community health workers like Sharine Eliza are able to talk with at-risk women about the importance of looking after their health during and between pregnancies.

"I now have a new role," said Eliza. "I'm talking to these patients about the postpartum period and reproductive health. I wasn't having these conversations before."

MSD FOR MOTHERS IN ACTION

WE AT MSD FOR MOTHERS HAVE AMBITIOUS GOALS.

- Quality obstetric care in every hospital in the nation
- Every new mother knows the warning signs of life-threatening health problems after childbirth
- Maternal mortality review boards in every state
- Strong linkages between primary and prenatal care in every community

KEY ACHIEVEMENTS



16 STATES IMPROVING
MATERNAL HEALTH
ACROSS THE U.S.



300+ HOSPITALS STRENGTHENED
TO PROVIDE QUALITY CARE

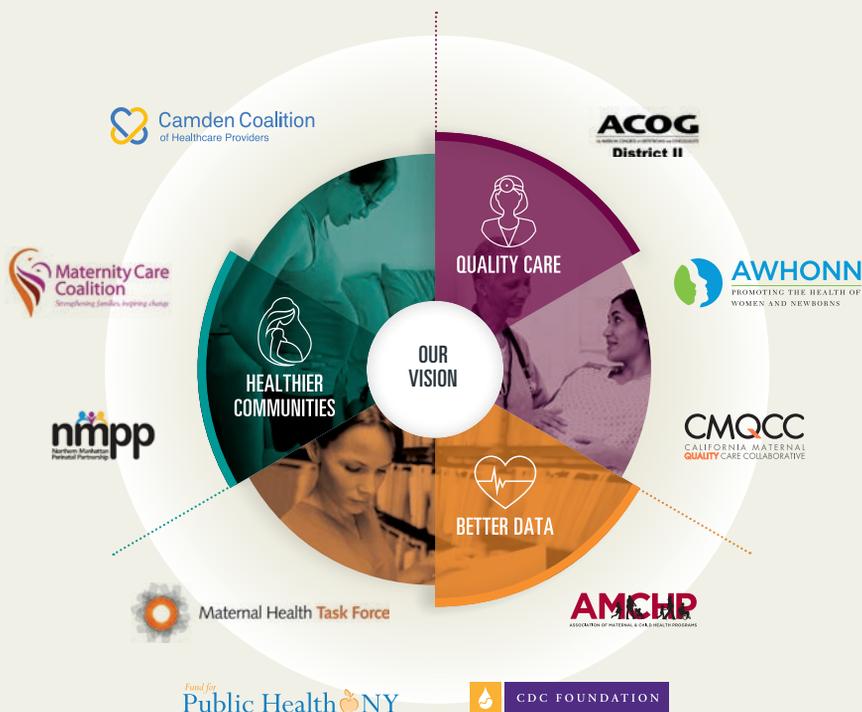


12 MATERNAL MORTALITY
REVIEW BOARDS STRENGTHENED
TO INFORM POLICY CHANGE



1.2 MILLION WOMEN
WITH RELIABLE ACCESS TO
QUALITY CARE

OUR PARTNERS







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For the latest updates on our programs and progress, visit www.MSDforMothers.com

AUGUST 2016