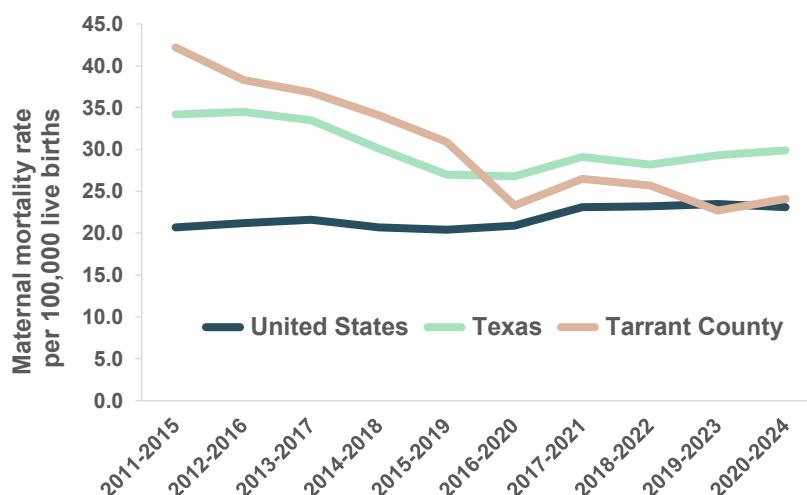




## MATERNAL MORTALITY IN TARRANT COUNTY

- Maternal mortality rate is the number of maternal deaths from obstetric causes less than 42 days postpartum per 100,000 live births. This includes ICD codes A34, O00-O95, and O98-O99.
- Since 2015, there have been an **average of 7.6 maternal deaths each year in Tarrant County**. To report out stable rates (based on at least 20 deaths), multiple years of data have been combined for this brief.
- The five-year maternal mortality rate for **Tarrant County** (24.1 deaths per 100,000 live births) was **slightly higher than the United States** (23.1) and **lower than Texas** (29.9) for the combined years of 2020 through 2024. (Figure 1)
- Tarrant County** maternal mortality rate overall is **1.8 times higher than the Healthy People 2030 objective** for the combined years of 2015 through 2024. (Figure 2)
- Tarrant County** maternal mortality rates **overall** and among **non-Hispanic Black and non-Hispanic White** mothers were **lower than Dallas County, Harris County, and Texas** for the combined years of 2015 through 2024. (Figure 3)

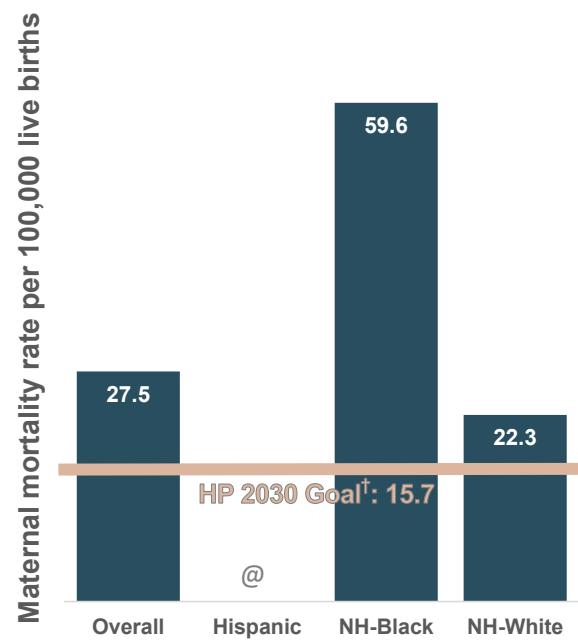
Figure 1. Five-year rolling maternal mortality rates in Tarrant County, Texas, and United States, 2011-2024



Caution should be taken when using data prior to 2013. A study by researchers at the Texas Department of State Health Services has found the number of maternal deaths in Texas in 2012 was actually less than half the number previously reported. The study brought to light an issue with properly identifying maternal deaths in our state. Therefore there is a high likelihood that the numbers we use to calculate maternal mortality rates for those years are overestimated.

**Maternal mortality among non-Hispanic Black mothers was 2.7 times higher than non-Hispanic White mothers and 3.8 times higher than the Healthy People 2030 objective**

Figure 2. Maternal mortality by race/ethnicity, Tarrant County, 2015-2024



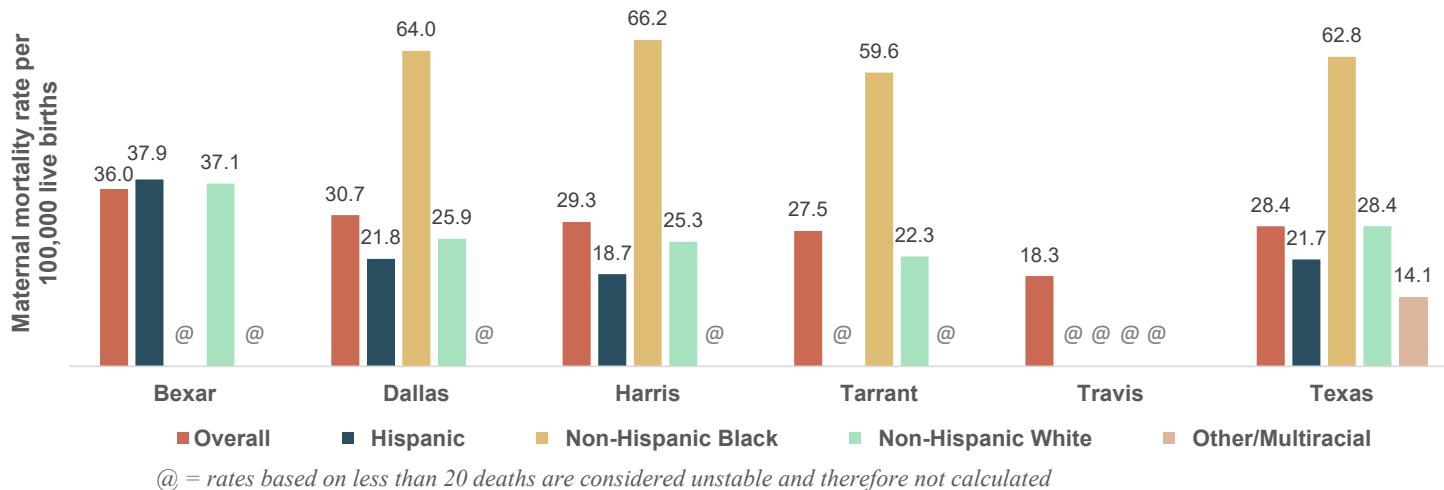
Maternal mortality rate = number of maternal deaths from obstetric causes less than 42 days postpartum per 100,000 live births, NH = Non-Hispanic

<sup>†</sup>HP 2030 Goal = Healthy People 2030 Objective: Reduce maternal deaths to 15.7 maternal deaths per 100,000 live births

Data sources: Centers for Disease Control and Prevention

Data Brief provided by: Statistical Analysis Team

Figure 3. Maternal mortality by race/ethnicity among Texas and large Texas counties, 2015-2024



**Among non-Hispanic Black mothers, those in Tarrant County had a lower maternal mortality rate than those in Dallas County, Harris County, and Texas for the combined years of 2015 through 2024**

**Texas Maternal Mortality and Morbidity Review Committee (MMMRC)** develops recommendations to reduce the incidence of pregnancy-related death and maternal morbidity related to its review of pregnancy-related deaths. This review includes any death of a woman during pregnancy or within one year of the end of pregnancy from a pregnancy complication, a chain of events initiated by pregnancy, or the aggravation of an unrelated condition by the physiologic effects of pregnancy.

#### Texas MMMRC 2024 recommendations based on reviewed 2020 cases [report link]:

1. Improve access to comprehensive health services for all women of childbearing age, including preconception, pregnancy, postpartum, and interpregnancy periods; facilitate continuity of care; implement effective care transitions; and promote safe birth spacing to reduce gaps and improve lifelong health.
2. Prioritize resources and treatments for pregnant and postpartum patients in future public health emergencies based on the consistent pattern of increased morbidity, mortality, and susceptibility in this population.
3. Engage Black communities and address health disparities in maternal and women's health program development.
4. Implement and amplify provider awareness of and participation in statewide maternal health and safety initiatives to reduce maternal mortality, morbidity, and health disparities.
5. Increase public awareness and community engagement to foster a culture of maternal health, safety, and disease prevention.
6. Improve integrated behavioral health care access for reproductive age women with mental health and substance use disorders.
7. Improve infrastructure and programs to address violence and intimate partner violence at state and community levels.
8. Foster safe and supportive community environments to help women achieve their full health potential.
9. Support emergency and maternal health service coordination and implement evidence-based, standardized protocols to prevent, identify, and manage obstetric and postpartum emergencies.
10. Improve postpartum care management, including education and health care coordination for those with mental health and/or high-risk medical conditions.
11. Prioritize continuing education, diversification, and increasing capacity of the maternal health workforce.
12. Apply continuous process improvement strategies for maternal mortality review protocols to support and increase case review capacity, quality, and recommendation development.

Maternal mortality rate = number of maternal deaths from obstetric causes less than 42 days postpartum per 100,000 live births

Data sources: Centers for Disease Control and Prevention, Texas Department of State Health Services

Data Brief provided by: Statistical Analysis Team