Chairperson Hilderbrand, Senator Oletha Faust-Goudeau, and members of the Senate Public Health and Welfare Committee:

My name is Dr. Sharla Smith. I am the Director and Founder of the Kansas Birth Equity Network and I am here as a Black mother and an advocate for ethnic minority mothers concerning SB 42, the study and investigation of maternal deaths in the state of Kansas.

Each one of us in the room understands the role and responsibilities of a mother, either because we are a mother, we had a mother, we have a wife and kids, or we have witnessed the love demonstrated by a mother. I stand here today to ask your support a bill that helps us identify the causes of death of all mothers! We must do our best to protect Kansas women because they are the stables in our Kansas community.

If maternal mortality in Kansas is an indicator of women ages 18-44 health and the health of Kansas families, then we should and can do better to make sure no mother dies of a pregnancy-related death. The Kansas maternal mortality rate between 2013 and 2017 was **22.4 per 100,000 mothers** almost 30% higher than the Health People 2020 goal. This means that 22 Kansas families do not have a mother, 22 babies in Kansas have no mother, 22 husbands with no wife, 22 mothers who lost their daughter, and 22 fathers who lost their daughter, there is 22 families with a lost. 22 is too much. When we discuss racial disparities, there are 69 Families of color with not mothers, 69 Babies of color with no mother, 69 husbands with no wife. 69 women is too much! In Kansas, we care about all women, so the question is why are not concern about the 69 women. This bill highlights the concern to determine the cause.

Most important our economics are affected by the loss, without the mother and without the family structure, these families are unable to boost our Kansas economy and these deaths are not without cost. It is estimated total **maternal** morbidity **costs for** all **U.S.** births in 2019 to be \$32.3 billion from conception through the child's fifth birthday reflecting 29 deaths per 100,000. This amounts to \$8,624 in additional costs to society for each maternal—child pair. Because the rate in Kansas was 22.4 in 2019 than these numbers can also apply to our economic loss.

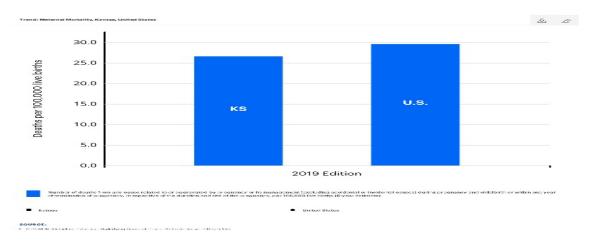
While we are aware of the racial disparities, what we need to recognize is that this is humanization. No Kansan woman should die of a preventable death and no Kansan should have to worry about dying of childbirth. However, we cannot ensure that Kansan women survive pregnancy if we do not thoroughly examine the deaths and causes of deaths. The solution is a more thorough review of the deaths that includes a committee of ethnic diverse members, performance indicators and performance measures that provide goals to achieve, help support the continuity of care, and examine the social determinants of health. It is one of our only options to minimize these deaths of Kansan women. I ask you if these things could be implemented at the state level, why are we discussing it today, why has this not been implemented and how can we work together to improve the health of all Kansas mothers.

The bill will allow us to know why every woman in Kansas dies during birth, examine more thoroughly the social determinants of health associated with these deaths, and develop metrics and support continuity of care for all women. Today I ask you to support this bill and make the decision to review and vote on it for every Kansan.

Name: Sharla Smith

Signature: Sharla Smith Date: January 18, 2022

https://www.americashealthrankings.org/explore/health-of-women-and-children/measure/maternal_mortality_a/state/KS?edition-year=2019



Subpopulations: Maternal Mortality, Kansas

Race/Ethnicity

Maternal Mortality - White

22.4

Maternal Mortality - Black

Deaths per 100,000 live births

Age

Maternal Mortality - Ages 25-34

19.8

Maternal Mortality - Ages 35-44

Data suppression rules are as defined by the original source.

Deaths per 100,000 live births

Race and ethnicity populations are as defined by the original source.

SOURCE

- CDC WONDER Online Database, Underlying Cause of Death, Multiple Cause of Death files, 2013-2017
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