### A CLOSER LOOK

# HUNGER HEALTH EQUITY

## Spotlight on Maternal Health



Feeding America is collaborating with March of Dimes to raise awareness about the connection between maternal health equity and food security. Together, we can help pregnant women and mothers who are facing hunger get the care and help they need to improve their prenatal and postpartum health.

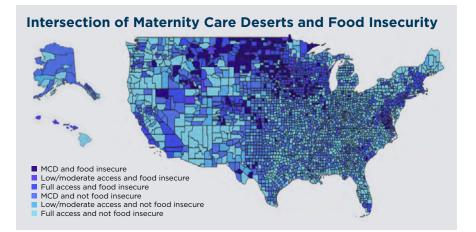
Maternal mortality rates in the United States are the highest among all developed nations. In 2020, the maternal mortality rate was 23.8 deaths per 100,000 live births.<sup>1</sup> These rates are 2.9 times higher among Black mothers compared to non-Hispanic white mothers due to systemic and structural barriers in the health care industry. Additionally, American Indian and Alaskan Native women experience approximately 1.25 times higher pregnancy-related mortality compared to non-Hispanic white women.<sup>2</sup>

There are many factors that influence maternal health outcomes such as access to healthy and fresh foods, income, social status, education, access to health care, housing, the physical environment, social supports, and health behaviors. Food insecurity and maternal nutrient depletion contribute to poor maternal health outcomes, including increased risk of iron deficiency anemia that is associated with higher risk for maternal morbidity and mortality.<sup>3</sup> Black pregnant women have the highest prevalence of iron deficient anemia at the time of labor.<sup>4</sup> Iron deficient anemia is also associated with increased risk for cesarean delivery, transfusion, prenatal bleeding, preeclampsia, placental abruption, poor maternal thyroid status, poor wound healing, cardiac failure, hemorrhage, and maternal morbidity and mortality.<sup>5</sup> Half of all maternal mortality events are preventable, which highlights the magnitude of impact that social and structural determinants of health have as levers for prevention.<sup>6</sup>

#### **Diet and Nutrition**

It is well understood that proper diet and nutrition is crucial to maternal health. Food insecurity during pregnancy has been linked with gestational diabetes, iron deficiency, pregnancy complications, postpartum depression, and obesity. Women who experience poor maternal health outcomes are at increased risk for recurrence of these health outcomes in future pregnancies and chronic disease later in life.

Community stakeholders, including food banks, food pantries, non-profits, public health, and health care organizations, can support mothers to access a nutritious, well-balanced diet to ensure the health and well-being of themselves and their children.



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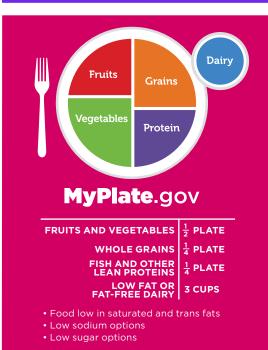
## FAST STATS

Household food insecurity during pregnancy is associated with increased stress.<sup>7</sup>

Women with gestational diabetes have an increased risk for Type 2 diabetes later in life. Gestational diabetes is a risk factor for poor maternal and infant health outcomes.<sup>8</sup>

Comparing all racial/ethnic groups in the United States, Black women experienced the highest pregnancyrelated mortality ratio of 41.7 deaths per 100,000 live births between 2014 and 2017.9

Women who experience poor maternal health outcomes are at increased risk for recurrence of these health outcomes in future pregnancies and chronic disease later in life.





HEAL is Feeding America's Health Equity Action League. A Closer Look is the companion to Feeding America's At First Glance Issue Brief series.

### Stories from the Field

After learning of the importance proper nutrition plays in reducing infant mortality rates, community leaders in Terre Haute, Indiana and the surrounding areas came together to address



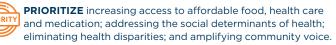
the needs of expecting families, mothers, and infants. Led by Purdue Extension, Terre Haute Catholic Charities Foodbank and All Babies Healthy Start Initiative by Union Medical have partnered with other organizations in the community to provide wrap around nutrition services for this vulnerable population. The All Babies Healthy Start Initiative is operated by various grants and is free to participants in a handful of Indiana counties.

#### The program seeks to remove every foreseeable barrier to a healthy pregnancy. successful delivery, and triumphant first year of life. They do this by offering:

- weekly food baskets donated by Terre Haute Catholic Charities Foodbank.
- cooking classes from Purdue Extension,
- nutrition education classes from Indiana State University.
- personalized health classes from Union Health's nurse navigators,
- childcare offered by the Vigo County YMCA, and
- transportation to classes if needed.

## Take Action! Address maternal health and hunger.

**CONVENE** health care, food/hospitality, education, social service, and other community partners to identify and develop solutions to hunger and health barriers within the community.



#### BUILD TRUST through positive interactions and

communication with communities and engage in developing strategies to address the unique and complex needs of people facing hunger, while eliminating bias, recognizing we are all in this together.

#### **TACKLING FOOD INSECURITY** TOGETHER



"Beginning a new healthcare partnership can seem overwhelming with so many social determinants of health needing to be addressed. Indiana's maternal mortality rate stands at 43.6 per 100,000 - the third highest in the country. It was an easy decision for us to partner with Purdue Extension, All Babies Healthy Start Initiative and other community groups to provide mothers with the resources to create a healthy start for their families.

Staff member.

Terre Haute Catholic Charities Food Bank



**DESIGN** culturally appropriate diet, nutrition, and health resources and make them available in local clinics, grocery stores, food banks and pantries, community centers, schools and places of worship.



ADVOCATE for policy, systems and environmental change approaches that support increased nutritious food access and improved health and well-being for community members in greatest need

- <sup>1</sup>Hoyert DL. Maternal mortality rates in the United States, 2020. NCHS Health E-Stats. 2022. DOI: <u>dx.doi.org/10.15620/cdc:113967</u> <sup>2</sup>Petersen EE, Davis NL, Goodman D, Cox S, Syverson C, Seed K, Shapiro-Mendoza C, Callaghan WM, Barfield W. Racial/Ethnic Disparities in Pregnancy-Related Deaths United States, 2007-2016. MMWR Morb Mortal Wkly Rep. 2019 Sep 6;68(35):762-765. doi: 10.15585/mmwr.mm6835a3. PMID: 31487273; PMCID: PMC6730892
- <sup>3</sup> Park CY, Eicher-Miller HA. Iron deficiency is associated with food insecurity in pregnant females in the United States: National Health and Nutrition Examination Survey 1999-2010. J Acad Nutr Diet. 2014 Dec;114(12):1967-73. doi: 10.1016/j.jand.2014.04.025. Epub 2014 Jun 20. PMID: 24953790. <sup>4</sup> Park CY, Eicher-Miller HA. Iron deficiency is associated with food insecurity in pregnant females in the United States: National Health and Nutrition Examination Survey 1999-2010.

J Acad Nutr Diet. 2014 Dec;114(12):1967-73. doi: 10.1016/j.jand.2014.04.025. Epub 2014 Jun 20. PMID: 24953790. <sup>5</sup> Smith C, Teng F, Branch E, Chu S, Joseph KS. Maternal and Perinatal Morbidity and Mortality Associated With Anemia in Pregnancy. Obstet Gynecol. 2019 Dec;134(6):1234-1244.

doi: 10.1097/AOG.000000000003557. PMID: 31764734; PMCID: PMC6882541.

<sup>6</sup> Howell EA. Reducing Disparities in Severe Maternal Morbidity and Mortality. *Clin Obstet Gynecol.* 2018;61(2):387-399. doi: 10.1097/GRF.00000000000349 <sup>7</sup> Laraia B, Vinikoor-Imler LC, Siega-Riz AM. Food insecurity during pregnancy leads to stress, disordered eating, and greater postpartum weight among overweight women.

Obesity. 2015;23(6):1303-1311. doi: 10.1002/oby.21075

<sup>9</sup> Howell EA. Reducing Disparities in Severe Maternal Morbidity and Mortality. Clin Obstet Gynecol. 2018;61(2):387-399. doi: <u>10.1097/GRF.0000000000000349</u>
<sup>9</sup> Pregnancy Mortality Surveillance System. (April 13, 2022) Center for Disease Control. <u>www.cdc.gov/reproductivehealth/maternal-mortality/pregnancy-mortality-surveillance-</u>

system.htm



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