

Tackling maternal mortality in Pakistan: A perspective and call for systemic improvements

Ajeet Singh, Alishba Raza

Dear Madam, Pregnancy should be a time of immense hope and a positive experience for all women. This period necessitates significant management and care, as the woman's body undergoes numerous physiological and psychological adaptations. Thus, establishing an effective management system and a proficient maternal healthcare service is of utmost importance for the mother and the children. However, in developing countries like Pakistan, it is still a shockingly scary experience for millions of pregnant women who lack access to high-quality healthcare systems. For many females, the miracle of childbirth is marred by the tragedy of maternal death. Maternal death is defined as the death of a woman while pregnant or within 42 days of termination of the pregnancy, irrespective of the duration and site of the pregnancy, from any cause related to or aggravated by the pregnancy or its management but not from accidental or incidental causes¹.

Additionally, Pakistan has been ranked as one of the top ten countries expected to contribute 60% of all maternal deaths worldwide². It continues to have the highest maternal deaths in Southeast Asia³. Despite Pakistan being officially categorized as a country with high maternal mortality rates, the actual number of cases could be even higher due to under-registration of vital events, particularly in the rural parts of the country⁴. Nevertheless, based on interview survey methods, the maternal mortality ratio in Pakistan is estimated to have declined from 430/10⁵ live births in 1990 to 180/10⁵ in 2015². However, the recent report, "Trends in Maternal Mortality", released by WHO, UNICEF, UNFPA, the world bank, and UN Population Division, reveals alarming setbacks for women's health over recent years, as maternal deaths either increased or remained stalled in nearly all regions of the world after 2015⁵. The report statistics indicate a public health emergency that a woman dies every two minutes due to complications

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Third Year MBBS Student, Dow Medical College, Dow University of Health Sciences, Karachi, Pakistan.

Correspondence: Ajeet Singh. Email: ajeetsinghsodho95@gmail.com

ORCID ID. 0009-0009-4090-5393

associated with pregnancy or childbirth. It emphasizes that the world must significantly accelerate progress in reducing maternal deaths or risk the lives of over one million more women by 2030⁵. While the entire global community contends with the maternal mortality, Pakistan shoulders a disproportionate share of its consequences².

In Pakistan, poor maternal health is potentially linked to limited access to family planning resources, economic challenges associated with poverty, failure to address health issues such as malnutrition and anaemia, and a general cultural inclination of having at least one male descendant before the final pregnancy. The potential causes should be known by health authorities and doctors, as well as government officials, in order to help fund research investigations and craft strategies to combat the risk of an increasing prevalence of maternal mortality.

Several interventions need to be implemented to reduce maternal mortality rates (MMR) in Pakistan. There is a need to improve access to quality maternal healthcare services, which can be achieved through strengthening health systems and increasing investments in maternal health programmes to optimize, maintain and improve the quality of our procedures. Additionally, it's essential to spread awareness about maternal nutrition and healthcare, along with addressing family planning and the sociocultural stigma to have at least one male offspring before the final pregnancy. Furthermore, it is crucial to consider women's mental well-being during every follow-up visit. Finally, communities need to be engaged and address cultural beliefs and practices that may hinder women's access to quality maternal healthcare services⁶.

In conclusion, reducing maternal mortality rates (MMR) requires a multi-faceted approach that addresses the underlying social, economic, and cultural determinants of maternal health. It is high time for Pakistan with such a staggering number of maternal deaths each year, to prioritize maternal health and invest in interventions that will save the lives of millions of women and girls.

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References

1. National Institute of Population Studies (NIPS) Pakistan, International Coaching Federation (ICF). Pakistan Maternal Mortality Survey 2019: Key Indicators Report. Islamabad, Pakistan, Rockville, Maryland, USA: NIPS and ICF; 2020. [Online] 2020 [Cited 2023 February 24]. Available from URL: <https://dhsprogram.com/pubs/pdf/PR128/PR128.pdf>
2. Anwar J, Torvaldsen S, Sheikh M, Taylor R. Under-estimation of maternal and perinatal mortality revealed by an enhanced surveillance system: enumerating all births and deaths in Pakistan. *BMC Public Health* 2018;18:428. doi: 10.1186/s12889-018-5363-3.
3. Khowaja AR, Mitton C, Qureshi R, Bryan S, Magee LA, von Dadelszen P, et al. A comparison of maternal and newborn health services costs in Sindh Pakistan. *PLoS One* 2018;13:e0208299. doi: 10.1371/journal.pone.0208299.
4. AbouZahr C. Global burden of maternal death and disability. *Br Med Bull* 2003;67:1-11. doi: 10.1093/bmb/ldg015.
5. Ahmed A. 'A woman dies every two minutes during pregnancy, childbirth'. News release. The Dawn News Media Centre. [Online] 2023 [Cited 2023 October 27]. Available from URL: <https://www.dawn.com/news/1738830#:~:text=The%20report%2C%20%E2%80%9CTrends%2n%20Maternal%20Mortality%E2%80%9D%2C%20released%20on,stagnated%20in%20nearly%20alI%20regions%20of%20the%20world>
6. Omer S, Zakar R, Zakar MZ, Fischer F. The influence of social and cultural practices on maternal mortality: a qualitative study from South Punjab, Pakistan. *Reprod Health* 2021;18:97. doi: 10.1186/s12978-021-01151-6.