On reducing maternal mortality in Mexico:
From access to care to quality of care

Rosario Cárdenas, Universidad Autónoma Metropolitana, carde@correo.xoc.uam.mx
Graciela Freyermuth, CIESAS Sureste
Paola Sesia, CIESAS Istmo

In spite of a steady reduction in the level of mortality in Mexico, maternal deaths continue to be one of the main causes of concern regarding women's health. Estimates of maternal mortality ratio highlight two features regarding this indicator. First, that maternal mortality is a major public health problem with levels between six and eight times higher than those observed in the US or Canada and two or three times above those reported in other countries of Latin America. Secondly, that the maternal mortality ratio has remained almost stable during the last 10 years.

A straightforward explanation poses that since many of the deaths are taking place in rural communities, lack of access to modern health services and use of traditional birth attendants are the reasons behind the high maternal mortality figures. Furthermore, given that many of the counties where deaths are taking place are among those mainly inhabited by indigenous groups, it has been argued that cosmogonies and cultural factors are acting against government's efforts aimed at expanding maternal health care.

It cannot be denied that in many indigenous communities women have a low social status. There is social control over women behavior exerted first by the male members of her family, afterwards by their husbands and finally by their mothers in law.

The objective of this paper is to analyze to what extent lack of access to health care could be held responsible for the high level of maternal mortality and which others elements pertaining to health services characteristics could also help explain this situation.

Two sources of data were analyzed. Vital statistics information was used for examining the situation in the country as a whole. A series of 500 verbal autopsies were carried out in selected counties of Chiapas and Oaxaca.

The examination of vital statistics shows that a high proportion of maternal deaths took place among women not in the extreme age groups, that most of them were in stable marital unions and that the majority received health care for this condition.

Verbal autopsies were conducted interviewing family members of women who die from maternal causes who were identified through the vital statistics system. The information gathered show that many women seek health care from medical personnel. In some cases, the physician did not diagnose the true cause of morbidity or started a treatment that was either incomplete or the first choice. In some other cases, the physician knew what should be done, however did not have the equipment or materials needed in the medical unit. In some other, medical personnel failed to recognize the complication and therefore the proper treatment.

The above mentioned results highlight the need of a comprehensive approach for tackling this health problem. Stopping at expanding access to health services is not going to be enough is there is a failure to recognize the serious underequipment of many medical units. Furthermore, in spite of proper equipment, no improvement could be expected in the reduction of maternal mortality, if proper training of medical personnel, particularly regarding the identification and management of obstetric emergencies, is not considered. In addition, an effective referral system that allows for rapid transit from clinics to hospitals of those women whose pregnancies or deliveries have complicated is very much in need as well as a working relationship with traditional birth attendants that are still sought, in some cases, as the first health support, particularly during pregnancy and the first stages of labor.

Maybe failure to examine the situation within the health services, combined with a simplistic view of indigenous communities and an emphasis mainly on access to health care have been responsible for the weak results regarding maternal mortality in Mexico.