

Request from OHCHR regarding preventable maternal mortality and morbidity and human rights in humanitarian settings

In the following, the Ministry of Health, Denmark provides information to questions regarding maternal mortality and morbidity as requested by the Office of the High Commissioner for Human Rights.

- 1) In general, Denmark is one of the safest places in the world to give birth. The neonatal mortality rate was 2.6 (per 1000 live births) in 2016 and the maternal mortality ratio was 4 (per 100.000 live births) in 2017.

The Danish maternity medical care and health services is part of the national, universal health care system. The area is regulated by the Danish National Guideline of Maternity Care, which is published by the Danish Health Authority. The existing guideline was published in 2008 and edited in 2013. The guideline set the scope and content of the free and universal maternity care, which is accessible for the pregnant woman and her family.

The guideline include a range of different topics in relation to the pregnancy and the care for the newborn child such as health promotion, prevention, medical treatment and maternity leave. According to the guidelines, the woman has the right to receive a range of consultations with a midwife and the general practitioner throughout the pregnancy. The consultations during the pregnancy focus both on the physical and mental health of the mother and the unborn child. In addition, the woman has a consultation with her general practitioner after she has given birth.

The services, including the number of consultations a pregnant woman has during her pregnancy, are differentiated according to the pregnant woman's needs and risk profile. For example, special services are offered to vulnerable women and their families; this also include problems with abuse of drugs and/or alcohol or women with somatic or mental diseases such as diabetes or anxiety.

The guideline has recently undergone a thorough revision with the purpose of improving the existing early and differential maternity care and securing a more individual care. The updated guidelines are expected to be published during 2020.

In addition to the revised national guidelines, the Danish Health Authority has also composed a new National Guideline for the Organization of public Maternity Care. Furthermore, the Danish Health Authority also has composed A National Guideline on Prenatal Diagnosis, which regulates more specifically the prenatal diagnosis.

In conclusion, Denmark's effort to eliminate preventable maternal mortality and morbidity takes places in this policy framework.

- 2) Please see the answer to question 1
- 3) Please see the answer to question 1
- 4) The main areas of concern in relation to maternal morbidities in Denmark are tobacco smoking and obesity, which can lead to gestational diabetes or hypertension. This is of concern on the long run as it increases the risk of developing type 2 diabetes and cardio-vascular disease later in life. Mental health problems is increasing particularly among young women, which is of concern as severe mental health problems such as depression can impede mother and child attachment. There is also focus on social inequality as an important cause of differences in maternal morbidity.
- 5) In Denmark, we are aware of the different factors that can have an impact on level of health literacy in relation to maternal care. Health literacy is defined as an individual's ability to learn, comprehend and use information in relation to health care. The updated guidelines of Maternity Care specify that the level of education, migrant background, socio economic status and crisis due to physical or mental challenges can have an influence on whether a person can take in health care information and the amount of information the person can comprehend. Therefore, health professionals should consider the mother's background and provide information in an appropriate manner.
- 6) According to the Danish Health Act, the regions and municipalities are responsible for ensuring that the health care system provides the following care services to the population: prevention, health promotion and treatment. This also include maternity care.

As stated in the answer to question 1, the National Guideline to Maternity Care further describes the content of the maternity care. Prevention both before and during the pregnancy is central part of the content throughout the guideline. This also include preventive measures in relation to maternal morbidities such as for example diabetes, obesity and postnatal depression.

- 7) As stated in the answer to question 1, the Danish maternal care are differentiated according to the pregnant woman's needs and risk profile. Therefore, special and extended services are offered to vulnerable women and their families; this also include problems with abuse of drugs and/or alcohol or women with somatic or mental diseases such as diabetes or anxiety.
- 8) In Denmark, we have a high level of digital registration and several databases concerning pregnancy and fetal medicine. The state runs the Danish Medical Birth Register and publishes data on the number of births and children born. The statistics has information about procedures and complications in relation to the births for example, how many women had a caesarean section and how many women who has gestational diabetes. Furthermore, there is information about the women for example their BMI, age and smoking or non-smoking.

Furthermore, the five regions, which organize health services in Denmark, compile yearly reports on maternal morbidities following giving birth (Dansk Kvalitetsbase for Fødsler), which includes rates of caesarean section, obstetric anal sphincter ruptures, bleeding more than 1000 ml and other indicators.