## **Dutch response of the Ministry of Health on Maternal Health questionnaire**

- 1. What steps has your Government or organization taken to utilize a human rights-based approach in policies and programmes to eliminate preventable maternal mortality and morbidity? How has the technical guidance assisted your Government or organization in designing, implementing, revising and/or evaluating such policies and programmes?
- Art. 22 of the Constitution of the Netherlands states that the authorities shall take steps to promote the health of the population. In the Health Insurance Act is regulated that every citizen has a right to 'affordable' Maternal care, as a part of the Universal Health Care Package. In the Healthcare, Quality, Complaints and Disputes Act (WKKGZ) is ensured that all patients receive good quality of care and what people can do if they have a complaint about their care. In this way, every Dutch citizen has the fundamental access to good qualified care. Therefore, policies and programs focus on intervention through medical and societal factors.
- 2. Has the technical guidance assisted your Government or organization in building enhanced understanding of the requirements of a human rights-based approach3? If so, please expand upon the impact that such enhanced understanding has for the design and implementation of policies and programmes in this area.

Does not apply.

3. What challenges does your Government or organization face in implementing a human rights-based approach in policies and programmes to eliminate preventable maternal mortality and morbidity? Please elaborate on the nature of these challenges and steps taken to address them.

Does not apply.

4. Does your Government or organization regularly collect and analyse disaggregated data and information on maternal mortalities and morbidities, including in the context of COVID-19 pandemic? Please elaborate on good practices and challenges in this regard.

Maternal mortality has been registered in The Netherlands since 1950 by Statistics Netherlands (Centraal Bureau voor de Statistiek), where all vital statistics of the country are registered. Maternal mortality and morbidity is also part of the Perinatal Registry in the Netherlands. This registry has national coverage since 1985. In addition, the professional association of gynecologists has set up an Audit Committee Maternal Mortality that investigates the causes of individual cases of maternal mortality. During the pandemic, maternal morbidity around COVID-19 in the country has also been recorded in NethOSS (the Netherlands Obstetric Surveillance System).

5. Please elaborate on the main causes that may have led to poor maternal health outcomes in the context of COVID-19 pandemic in your country and/or context? Please also describe the impact of the COVID-19 pandemic response on the availability and accessibility and quality sexual and reproductive health, including maternal health services for women and girls.

On average, the Netherlands has about ten cases of maternal death per year. This number has not increased during the COVID-19 pandemic. The pandemic has not affected the accessibility of care either, but it did have some effect on the form of care provided: during the first lockdown in 2020, about eighteen percent of births took place at home, while this is usually about fourteen percent. During the second lockdown, the place of delivery returned to the usual division between home and hospital.

6. Please provide information on whether there is a particular group of women in your country and/or context who have been disproportionately affected by the pandemic and response measures when accessing sexual and reproductive health, including maternal health services. (For instance, adolescents, women living with HIV, indigenous women, racial and ethnic minority women, women from rural areas, persons with diverse sexual orientations, gender identities etc.)

The above sources do not indicate that in the Netherlands particular groups of women have been disproportionately affected by the pandemic and response measures when accessing maternal health services.

7. What measures have your Government or organization undertaken in order to mitigate the impact of COVID-19 pandemic on maternal health? Please elaborate on any lessons learned, good practices as well as challenges faced.

Like answered in the questions before, there is no indication that maternal health have been disproportionately affected by the pandemic. As the Ministry of Health we are funding the organization (College Perinatal Care) that takes care of the integrated birth care in the Netherlands. That organization communicated extra information (webinars, flowcharts, guidelines, etc.) about birth care and how to deal with covid-19.