



Within just 3 years of its creation, the Observatory of Maternal Mortality in Mexico is already making some important contributions to reducing maternal mortality.

OBSERVATORY OF MATERNAL MORTALITY IN MEXICO: A CIVIL SOCIETY-LED INITIATIVE

SUMMARY

Maternal mortality is a complex social phenomenon resulting from huge health system failures and structural patterns of discrimination against women. Most of the women who die during pregnancy or childbirth are poor and have limited or no access to adequate healthcare services. Almost all of these deaths are preventable. Despite a number of African and Asian countries having made significant headway, more than halving their levels of maternal mortality since 1990, these two regions together still account for 85% of maternal mortality in the world. In contrast, in Latin America the average maternal mortality ratio is relatively low at 80 deaths per 100,000 live births. Notwithstanding, large differences can still be found between countries in the region, as well as amongst women from different socio-economic and ethnic groups.

Improving access to reliable information for understanding and preventing maternal death is one of the key challenges facing developing countries today. In 2010, the Observatory for Maternal Health in Mexico was established as a new civil-society led mechanism to create a system of indicators that facilitate the analysis, assessment and systematic monitoring of processes and outcomes of policies, strategies, programmes and services aimed at reducing maternal mortality in the country. This Brief provides an analysis of some of the key ways the Observatory is supporting the government to develop and improve public policy aimed at reducing maternal mortality, particularly amongst the country's most vulnerable women.



KEY LESSONS LEARNED

The Observatory for Maternal Mortality in Mexico has implemented a novel strategy based on the creation of multidisciplinary, inter-agency and cross-sector partnerships for carrying out coordinated actions aimed at reducing maternal mortality.

By working with the main decision makers at federal, state and municipal levels, the Observatory is facilitating the collaborative development of maternal health policy that benefits from the technical expertise of different members of government and civil society.

The Observatory model is replicable at local level where efforts to change cultural attitudes towards maternal health can bolster broader objectives aimed at improving access to public services.



THE MEXICAN CONTEXT

Between 2003 and 2011, maternal mortality in Mexico dropped from 66.18 maternal deaths per 100,000 live births (1,304 maternal deaths in total) to 51.7 maternal deaths per 100,000 live births (a total of 971 maternal deaths). This is due in large part to the implementation of government initiatives and programmes aimed at ensuring universal health care coverage for pregnant women. The national health insurance programme *Seguro Popular*, for example, has been shown to have had a significantly positive effect on access to obstetrical services by pregnant women between 2001 and 2006.¹ And since 2009, Mexico's three main public health providers have been providing emergency obstetric care to all pregnant women free of charge under the government's Comprehensive Strategy for Reducing Maternal Mortality.²

Despite this progress, differences in maternal health across the national demographic persist, with mortality rates higher among less educated, poor, rural, and indigenous women. These disparities reflect on-going inequalities in access to affordable, quality, and culturally appropriate maternal health services.³ In order to meet Millennium Development Goal 5 and reduce its maternal mortality ratio by three-quarters to 22.4 by 2015, the Mexican government must compliment its work to achieve universal health coverage with special measures that aim to address the complex causes of maternal death among the country's most vulnerable women.

THE OBSERVATORY OF MATERNAL MORTALITY IN MEXICO

Based on the gender observatory model that has emerged across the Latin America region in recent years (Box 1), the [Observatory of Maternal Mortality \(OMM\)](#) was formed in 2010 between different actors working on maternal health in Mexico. These actors included civil society organisations⁴, public institutions (such as the National Women's Institute and the National Institute of Public Health) and research institutes. Technical and financial support was received from United Nations agencies and other international donors.⁵ The main objective of the OMM is to contribute to reducing maternal mortality in Mexico via three main activities:

1. Creating and maintaining a system of indicators in order to analyse, evaluate and monitor processes and outcomes of public policy, strategies, programmes and services aimed at reducing maternal mortality
2. Assessing the effectiveness of public policy aimed at reducing maternal mortality, including the fulfilment of responsibilities by different government agencies, the degree of transparency of accounting, budget expenditure monitoring and impact assessment
3. Establishing a communications strategy to disseminate findings amongst decision makers and the general public and to promote the participation of maternal health service users in citizen oversight and advocacy initiatives

Box 1: The Role of Gender Observatories in Latin America

Gender observatories have emerged as a new model throughout Latin America to track progress towards the realisation of women's rights and identify the persistent causes of inequality between men and women in social, political, economic and cultural spheres. Latin American countries that have created national gender observatories include Argentina, Brazil, Chile, Colombia, Mexico, Peru and Venezuela.⁶

Gender observatories are mainly set up by non-governmental organisations (NGOs) and/or by universities, with significant financial and technical support from external sources and donors. The broad range of activities carried out by these observatories includes monitoring public policy, developing and maintaining databases of relevant indicators, providing technical assistance and capacity building, and disseminating information among decision makers and the general public.

At the tenth session of the Regional Conference on Women in Latin America in 2007, the member states of the Economic Commission for Latin America and the Caribbean (ECLAC) requested the creation of a [Gender Equality Observatory for Latin America and the Caribbean](#) to assess fulfillment of international gender equality goals and targets, provide technical support and training for producing and processing official statistics and to produce annual reports offering a diagnosis of gender gaps in key areas including employment, decision making and political representation, gender violence, health and reproductive rights.

To learn more about gender observatories in Latin America, please consult the [ELLA Guide to Gender Equality In Latin America](#).

Source: Fernós, M. D. 2010. *National Mechanism for Gender Equality and Empowerment of Women in Latin America and the Caribbean Region*. ECLAC, Santiago.

¹ Sosa-Rubí, S. G., Galárraga, O., Harris, J. E. 2007. *Heterogeneous Impact of the "Seguro Popular" Program on the Utilization of Obstetrical Services in Mexico, 2001-2006: A Multinomial Probit Model with a Discrete Endogenous Variable*. In: *Journal of Health Economics* 28(1) 20-34.

² Observatory of Maternal Mortality in Mexico. (No date). *Situación Actual (Current Situation)*. OMM. Online publication.

³ Regional Interagency Task Force for the Reduction of Maternal Mortality. (No date). *Reduction of Maternal Mortality and Morbidity*. Regional Interagency Task Force for the Reduction of Maternal Mortality, New York.

⁴ Fundar, Centre for Analysis and Research, is one of 18 civil society organisations involved in the Observatory. Fundar's role in the OMM has centered around providing support to the development of communication strategies, and technical assistance and training on budget analysis.

⁵ For a full list of members, please see the [OMM website](#).

⁶ For information on national gender observatories in Latin America, please consult The [Gender Equality Observatory for Latin America and the Caribbean](#) online.



The work of the OMM in Mexico possesses two interesting characteristics that differentiate it from other observatories in the Latin America region. First, CSOs play a leading role in the collaborative decision making processes developed by OMM members. A CSO representative is in charge of the Secretariat, which represents the OMM before international and regional donors, stakeholders and national authorities. The Secretariat is also responsible for coordinating the activities of the Working Groups and other internal decision making processes. A second defining characteristic is that OMM members representing different sectors have organised themselves into three technical Working Groups (WG) responsible for carrying out the Observatory's three main activities.⁷ These two characteristics build strength and depth to the Observatory's approach and functions by facilitating the sharing of diverse perspectives on how to tackle the issue of maternal mortality in Mexico.

TOWARDS REDUCING MATERNAL MORTALITY

The OMM is already making some important contributions to reducing maternal mortality in Mexico, despite being in operation for just three years. This Brief focuses on two key ways in which the OMM is influencing and impacting on public policy and practice.

1. Improving Access to Information on Maternal Mortality

In order to target the most affected populations with appropriate policies and programmes, governments need accurate information about maternal mortality in their countries. Unfortunately, measuring maternal mortality is complicated by the fact that nations with the least developed health system infrastructure also tend to lack reliable mechanisms for identifying, registering, and counting maternal deaths.

The OMM in Mexico collaborates directly with the government to produce databases on maternal mortality throughout the country via partnerships with four institutions - the [National Population Council](#) (*Consejo Nacional de Población*), the

[National Institute of Statistics and Geography](#) (*Instituto Nacional de Estadística y Geografía*), the [National System of Information on Health](#) (*Sistema Nacional de Información en Salud*) and the [Directorate General of Information on Health](#) (*Dirección General de Información en Salud*).⁸ By working directly with the staff members responsible for data collection and analysis, the OMM aims to maintain access to public information on maternal health regardless of any political changes.

The OMM has also signed an [agreement](#) with the Directorate General of Information on Health and the Directorate of Epidemiology of the Ministry of Health which secures OMM access to clinical records on the deaths of pregnant women. This information is analysed and translated by the OMM into indicators and disaggregated statistical data in an attempt to identify the socio-economic causes of maternal mortality in every Mexican province. This data is publicly available on the OMM website and has also been summarised in reports that are sent directly to decision makers via email or shared during face-to-face meetings. One such report is the [Numeralia](#) which provides a summary of data on each Mexican province, including an analysis of patterns in maternal mortality according to variables such as residence, access to health insurance and other socio-demographic indicators.

One of the most important contributions of the OMM has been to show that maternal mortality is not evenly distributed across the Mexican population and that there is a higher risk in states with greater levels of socio-economic inequality and racial/ethnic discrimination.⁹ For example, indigenous women of Chiapas, Guerrero and Oaxaca face disproportionately high risks of death during pregnancy, childbirth and the post-partum period due to structural barriers to accessing health services (such as poverty and lack of information on available services), to low quality health care, and to a shortage in the availability of human resources.¹⁰ By sharing this information with decision makers, the OMM is helping to reshape maternal health policy so that it prioritises the needs of the most vulnerable women.

⁷ Observatory of Maternal Mortality in Mexico. 2011. [Una Experiencia de Contraloría Social. \(An Experience of Social Accountability\)](#). OMM, Mexico City.

⁸ Examples of these databases include [Principales Indicadores en Salud Reproductiva \(Main Indicators on Reproductive Health\)](#) and [Población, Hogares y Vivienda. \(Population, Households and Housing\)](#), both produced by the National Institute of Statistics and Geography, and [Muertes Maternas \(Maternal Mortality\)](#) produced by the National System of Information on Health.

⁹ OMM. 2011, see above n7.

¹⁰ A range of ELLA materials have been developed that focus on indigenous and ethnic minority rights. The full list can be accessed in the [ELLA Guide: Promoting Indigenous and Ethnic Minority Rights in Latin America](#).



2. Assessing the Effectiveness of Public Policy

Using the data and indicators it develops, the OMM assesses the effectiveness of government policy and programmes for reducing maternal mortality across Mexico. OMM assessments are carried out independently, drawing from three main sources of evidence. First, structured interviews are carried out with officials from state health authorities, local ministries of finance and the [National Center for Gender Equity and Reproductive Health](#), housed within the Ministry of Health and responsible for the distribution of public resources to local health ministries.¹¹ Second, OMM representatives undertake field visits to local health institutions and, finally, the OMM lodges requests to access information held by these public institutions.

The OMM monitors two public policies in particular - the Agreements to Strengthen the Actions of Public Health in the States (*Acuerdos para el Fortalecimiento de las Acciones de Salud Pública en los Estados*) and the General Inter-institutional Agreement for the Attention of Obstetric Emergencies (*Convenio Urgencias Obstétricas*), both led by the Ministry of Health (MoH) and implemented in all 31 Mexican provinces through state public health authorities.

The Agreements to Strengthen the Actions of Public Health in the States is a budget mechanism that the ministries of health at the federal and state levels sign each year, and which includes a range of targets relating to resource management, outcomes and accountability.¹² The OMM has monitored the design, development and implementation of this Agreement in three provinces in the South of Mexico where maternal mortality rates are still high (Guerrero, Oaxaca and Veracruz) with the aim of assessing its effectiveness and making policy recommendations. OMM monitoring to date has revealed poor resource management amongst local authorities and a lack of accountability mechanisms for tracking expenditure and making this information publicly available.¹³ Based on these findings, the government has made some effort to adopt and strengthen accountability mechanisms to oversee the execution of this agreement.

The General Inter-institutional Agreement for the Attention of Obstetric Emergencies aims to reduce the economic barriers to maternal health services by ensuring that every pregnant woman with an obstetrical emergency receives care in any public medical facility managed by the Mexican

Institute of Social Security, the Health Institute or the Ministry of Health. The OMM has monitored the effectiveness of this agreement in three provinces in southern Mexico (Chiapas, Oaxaca and Tabasco), as well as in Mexico City. OMM monitoring has identified the main strengths and weaknesses in the implementation of this agreement, and has provided recommendations for federal and state governments to improve performance. Based on these recommendations, the Ministry of Health has widened the scope of the Agreement for Emergency Obstetric Care to include free medical assistance for pregnant women suffering from complications during childbirth and in the puerperal phase.¹⁴

REPLICATION AT LOCAL LEVEL

Since 2011, some Mexican states with a strong civil society and a history of collaborative work have replicated the OMM model at local level, including in Chiapas, Guerrero, Oaxaca, Quintana Roo, San Luis Potosí, Sonora and Zacatecas. The OMM model is particularly relevant for provinces like Chiapas, Guerrero and Oaxaca where maternal mortality rates remain high and political conditions are hostile towards attempts to improve accountability and financial transparency.

Like the national OMM, these state observatories are independent mechanisms with members from local CSOs, public health institutions and research institutes. The national OMM played a leading role promoting the implementation of its model at the local level by providing technical assistance and managing financial resources received from international donors and United Nations agencies.¹⁵

The local observatories mainly focus on lobbying public institutions to prevent maternal mortality by promoting the effective monitoring of local government activities and spending. Another key activity is related to strengthening citizen capacities, mainly in rural and poor communities, in order to raise people's awareness about their rights to and the benefits of maternal health services.

Local observatories are useful mechanisms that complement the national OMM's objectives since they generally have a better understanding of the local context, work with local organisations promoting women's rights and, most importantly, incite change in socio-cultural attitudes around maternal mortality.

¹¹ Ibid.

¹² Ibid.

¹³ Observations provided by Daniela Díaz, a researcher at Fundar who has been involved in this monitoring exercise.

¹⁴ Hofbauer, H., Garza, M. 2009. *The Missing Link: Applied Budget Work as a Tool to Hold Governments Accountable for Maternal Mortality Reduction Commitments*. International Budget Partnership and the International Initiative on Maternal Mortality and Human Rights, Geneva.

¹⁵ Local experiences of the OMM are not yet being evaluated and as such, most of this information has been provided by Daniela Díaz.

CONTEXTUAL FACTORS

BEHIND THE CREATION AND FUNCTIONING OF THE OMM IN MEXICO



The [Maternal Health Committee in Mexico](#) (*Comité Promotor por una Maternidad Segura*) played a key role in the creation of the OMM. This CSO has been working with public institutions and regional agencies since 1993, promoting the dissemination and wider adoption of maternal health policies that enhance reproductive and sexual rights.

The OMM operates within political and institutional contexts that are currently favourable for achieving its objectives. The Mexican government has demonstrated its commitment to reducing maternal mortality by implementing a national strategy. This required coordinated efforts between public institutions and CSOs working on health and reproductive issues such as [Fundar](#), [Balance](#), [IPAS Mexico](#) and the [Population Council of Mexico](#).

The functioning of the OMM also benefits from the specialist technical capacities of Mexican CSOs, experts and academics that are collectively responsible for producing an increasing body of research on reproductive and maternal health issues. This investigative work has fed directly in to the OMMs activities which, in turn, are helping to strengthen public policy design and execution.

Finally, many feminist movements, CSOs, academics and experts in Mexico are proactively sharing their knowledge on gender issues and, at the same time, are helping to build public awareness of women's rights, including access to affordable, quality, and culturally appropriate maternal health services.

LESSONS LEARNED

- 1 The Observatory has adopted a novel advocacy strategy based on creating multidisciplinary, inter-agency and cross-sector partnerships in order to coordinate actions to reduce maternal mortality in Mexico.
- 2 Access to public information and budget analysis are two tools that can strengthen the efforts of organised civil society
- 3 The Observatory promotes accountability by working with the main decision makers responsible for maternal health at the federal, state and municipal levels of government and public institutional management. This approach facilitates the collective development of maternal health policy that benefits from the technical expertise and experience of different members of civil society.
- 4 The Observatory model is replicable at local level where efforts to change cultural attitudes towards maternal health can bolster broader objectives aimed at improving public services.

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