THE CONFIDENTIAL ENQUIRY INTO MATERNAL DEATHS IN SOUTH AFRICA: 
SUCCESSES AND CHALLENGES

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Introduction
Sub Saharan Africa is making slow progress in reducing maternal mortality and globally is furthest away from the target set for Millenium goal 5a.
In 1997, maternal deaths were made notifiable by law in South Africa. The National Committee for Confidential Enquiry into Maternal Deaths (NCCEMD) was set up to coordinate the identification, analysis and enquiry into each maternal death with the aim of devising recommendations which, if implemented, would reduce maternal mortality.

Aim
This paper will describe the process of the Confidential Enquiry, present data on maternal deaths from 1998 to 2011, describe recommendations and give a balance sheet of successes and challenges.

Results
The total number of maternal deaths per annum doubled from 800 in 1999 to 1,766 in 2009; with an increase in institutional maternal mortality ratio (MMR) to 176 deaths per 100,000 live births in the 2008-2010 triennium.
In 2011, there was a decrease in total deaths; and MMR to 153. The increasing MMR in the initial years was partly due to improved reporting but was largely accounted for by deaths due to non pregnancy related infections including HIV (NPRI). The NPRI deaths accounted for 40.5% of all maternal deaths in the recent triennium. Hypertension and haemorrhage each accounted for 14% of deaths. The recent decline in MMR is largely due to a reduction in NPRI deaths resulting from new improved HIV management strategies.
The recent triennial report identified avoidable factors at patient level (49%), at administrative level (35%), and health care provider level (14-38%).
The recent report identified 5 key recommendations; the 5Hs: reducing deaths from Haemorrhage, Hypertension and HIV, improving Health worker training and improving functioning of the Health system

Balance sheet: Successes of NCCEMD
- Maternal death Reporting system is in place
- Production of 5 comprehensive reports since 1998
- Publication of national guidelines and introduction of training programme
- Reduction in IMMR in 2011 (due to decrease in deaths related to HIV)
- Early identification of serious emerging problems

Balance sheet: Challenges
- Overall reduction in maternal deaths only seen first in 2011
- Incomplete implementation of recommendations
- Insufficient advocacy role
- Reporting and investigation of home deaths not occurring within present system