Mexico's Covid Response Led to the Deaths of 2,240 New Mothers

Maternal mortality rates have spiked across the country since the beginning of the pandemic.

Keren Vallejo Castro with her family. Source: Ana María Vallejo Castro

By Kelsey Butler
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At about noon on Jan. 30, Keren Vallejo Castro checked herself into a hospital in Baja California and delivered a healthy baby boy. Eight hours later, she was dead.

The official cause of death following what should have been a routine C-section was listed as a hemorrhage, but her family may never know why it happened. By the time Vallejo’s body arrived at the medical examiner, her organs had already been removed by the hospital, rendering the autopsy inconclusive. The hospital says it was following protocol in performing its own autopsy and sought permission from her next of kin. Vallejo’s family is convinced the 31-year-old mother was the casualty of medical malpractice. Five employees have since been fired, and an investigation by a government-mandated commission into the matter is under way.

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“We never would have imagined that she would have left us so young,” Vallejo’s sister, Ana María Vallejo Castro, says from her home in Baja.

Vallejo is among the 2,240 mothers in Mexico who’ve died because of complications from their pregnancy since the pandemic began. When Covid-19 patients overwhelmed the health-care system, government leaders prioritized their care over that of expectant mothers, turning labor and delivery—and more broadly, women’s health—into an afterthought. Pregnancy-related death rates across the country spiked by more than 60% in the first year of the pandemic, an analysis published in the journal *BMC Public Health* shows. By the beginning of 2021, 81 women were dying for every 100,000 live births, based on government data, compared with 24 at the same time in 2019.

**Mexico’s Annual Maternal Mortality Rate**
Deaths per 100k live births
Covid ravaged medical systems globally. But few, if any, places in the world saw their maternal mortality rates rise as sharply as they did in Mexico, where a uniquely mismanaged and long underfunded medical system and the government’s decision to put the economy first came at a devastating cost to women. The surge in deaths was so pronounced that the director of the Pan American Health Organization urged Latin American leaders to prioritize expectant mothers for vaccinations, citing Mexico along with Argentina and Brazil as big contributors to Covid deaths of pregnant women in the region.

Even before the pandemic, Mexico had some of the highest maternal mortality rates among the 38 member countries of the Organization for Economic Cooperation and Development, behind only Colombia and Latvia. In 2019, Mexico’s pregnancy-related death rate was more than four times the rate in Canada and more than nine times that in Japan. Covid only widened the gap.

Mexico’s decision during the pandemic to turn hundreds of its hospitals—one in every 10 in the Mexico City region alone—into Covid-only wards was the single largest contributor to the surge in maternal deaths. Few countries took this expansive of an approach. Medical centers began refusing to admit patients for any other emergency, including labor. “They simply told women when they got there, ‘No, this is a Covid hospital, you can’t be seen here,’” says Guadalupe Hernández Ramírez, a midwife in Mexico City.

Nurses and doctors working in rural areas were transferred to facilities in more populated areas, a move that penalized expectant women living in remote locations. The centers closest to them were transformed into virus triage centers—or were left with skeleton crews struggling to run them.

Many of these women balked at traveling to urban areas for prenatal care, either because they were scared of catching the virus or it was logistically too difficult, says physician Nina Mendez-Dominguez, who led the research that revealed the more than 60% spike in mortality rates. Their reluctance to travel meant complications often weren’t caught until it was too late, says Mendez-Dominguez, the
vice director for research and training at a specialty hospital in Yucatán state, where maternal deaths rose to the highest level last year in more than a decade.

Neither the Health Ministry nor the Institute of Social Security, which administers medical coverage for millions of Mexicans and operates the hospital where Vallejo died, responded to requests for comment. At a virtual event in February 2021, the institute's director general, Zoé Robledo Aburto, said Mexico's strategy had been “very, very focused on hospital reconversion” so doctors wouldn’t be forced to decide which Covid patients lived and which died. President Andrés Manuel López Obrador has said his government added tens of thousands of doctors and hospital staff to address worker shortages.
Ana María Vallejo Castro at her sister Keren's tombstone. *Source: Ana María Vallejo Castro*
Mexico’s health-care system was already woefully underfunded and understaffed before Covid came along. Total health spending in Mexico amounted to 5.4% of gross domestic product in 2019, one of the lowest levels among countries in the OECD. Even in pre-pandemic days, hospitals often lacked basic equipment, medication, and staff.

Before unilaterally zoning hundreds of hospitals for Covid care, López Obrador’s initial response to Covid was extremely limited. In a futile attempt at shielding Mexico’s economy from the pandemic, his administration imposed minimal restrictions to cut down on the spread of the virus. Testing was limited to people with symptoms. There were no travel bans and no stimulus payments to dissuade people from going into work. In mid-March 2020, he was still hugging and kissing constituents, urging them to go out and eat at restaurants.

One of the consequences was more severe outbreaks. The other was that more health-care workers died of Covid in Mexico than any other place in the world. Despite the government’s efforts to protect its economy, Mexico still only narrowly avoided recession last year.

The decision right before the pandemic by the López Obrador administration to revamp Seguro Popular, a type of health insurance used by a third of the population, made it even more difficult for expectant mothers to get the treatment they needed. The new system wasn’t fully up and running when the coronavirus made its appearance, leading to chaos and confusion and contributing to major drug shortages, according to researchers at the University of California at San Francisco who analyzed Mexico’s pandemic response.

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Doctors and midwives throughout the country blame disruptions in the availability of birth control, which could have prevented some high-risk pregnancies and abortions from occurring in the first place. In the first year of the pandemic, contraceptive services provided
by the Institute of Social Security declined by more than 50% as clinics shut down and doctors were diverted away, severely restricting access, according to a report led by the institute’s own chief of research.

Mexico's maternal mortality rates are trending lower now—in large part because Covid cases are down and hospitals are treating all types of emergencies again. The latest government figures put the rate at about 31 deaths per 100,000 live births. The nation's long-held goal of reaching a rate of 22 deaths per 100,000 births is within sight again.

Experts such as Mendez-Dominguez would like to see an increase in access to contraception, along with more telehealth services so doctors can catch problems early on. Infrastructure also needs to improve so rural women can be more easily and quickly transported for emergency health care. And doctors and midwives, who fill an important gap in a strained medical system, must work together better to care for patients, she says.

Talk of such efforts is of little comfort to Vallejo's family. Her husband now cares for their newborn baby on his own, as well as for their 3-year-old son, Edrick. Her sister says Edrick still cries out for his mother. —With Andrea Navarro and Nacha Cattan

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