MATERNAL DEATHS IN CANADA: TIME FOR A CONFIDENTIAL ENQUIRY SYSTEM

Personal story: Paul, Kitty and Kitty Lana Carr



Kitty Lai Ching Wong born in Hong Kong in 1957, the eldest daughter in a family with two brothers and two sisters. Her father was a fishmonger in one of the local markets and her mother worked with him too. Kitty came to Canada in June 1980 under the Caregiver Nanny Program determined to seek a new life and to further her education having studied at the Chuen Yuen College High School in Hong Kong. She worked as a nanny caregiver and put herself through university, attending Simon Fraser University in Burnaby, B.C. and graduating with a B.A. in Communications in June 1985. She was very proud of fulfilling her dream of coming to Canada and attaining her further education and she said 'I became very well adjusted to the Canadian life and culture during those five years and decided to stay and work in Canada'.

We first met at our company's Christmas Party in December 1988 where Kitty worked as assistant to the marketing manager of our Safety and Industrial Division. Our HR Manager introduced us and made sure I sat at the same table as Kitty. I too am an immigrant, having arrived in Canada in June 1981 from Ireland as a young engineer. That first night, I was drawn to Kitty immediately and those that know her know of her beauty, her natural charm, warmth, humor and intellect. We talked and danced all night and I was not even a dancer. We got married at UBC Golf Club in August 1990 and settled in Maple Ridge, close to two of my sisters, Bernice and Patricia, who were married with families nearby. Kitty quickly became part of our family and was cherished by all. People were naturally drawn to her and she was an exceptional cook, especially Hong Kong dishes. Family and friends here, and back in Europe when we travelled, enjoyed fantastic meals, which she magically produced in a whirlwind.

On Saturday morning December 31st, 1994 we drove to our nearby hospital. We were very excited and had everything prepared to welcome our first child into our home. Of course we were nervous and apprehensive but Kitty's pregnancy was uneventful and Kitty, though 37 was very fit and healthy. Little did we know what was to later tragically unfold. Up to noon everything proceeded as normal and we chatted to the nurses and doctors that were looking after Kitty. Kitty gave birth to our daughter through emergency caesarean at 4:20 PM and I was there by her side. I will not dwell on the details but I recall some two hours later Kitty being in some distress and was advised that she would have to undergo an emergency hysterectomy. I then, at some point, passed out and upon coming to, had to remove myself from the operating room, waiting anxiously in a hallway. I sensed the gravity and called my sister Bernice who lived nearby in Whonnock. She immediately came to the hospital. We waited and

prayed but, tragically, Kitty died on New Year's Eve just after 8:00 PM. There are no words to summarize the shock and devastation I felt at that time, on the day that was to be the most joyous in my family's life: the birth of our newborn daughter, now the day of the death of my beautiful wife and soulmate. How does one reconcile the pure joy of birth, and loss in death, simultaneously? My world fell apart, and the remaining void was indescribable.

We were going to have our first baby, everything up to that point was perfectly normal with the best resources and care available: how could this happen? this was Canada? -I vividly to this day recall on Wednesday January 4th, 1995 leaving the hospital with our new baby in a cradle, taking her home, not knowing what the journey ahead would be, fearful, anxious as a new father now faced with quickly becoming a father and a mother to our daughter Kitty Lana, named in memory of my wife Kitty and her best friend Lana, the name we had chosen if our baby was a girl. Family and friends and Kitty's colleagues at CP Rail Intermodal and my colleagues at Guillevin International Co. all reached out in different and pragmatic ways to lend support during those first early years. There was no crowdsourcing back then, there was no media attention, the internet was in its infancy and social media as we know now was not yet developed. Common human decency and support of family and colleagues and friends and my staying focused on just coping with our new reality. I can recall having a baby manual often in one hand and Kitty Lana in the other hand and trying to stay a few pages ahead to anticipate what might lay ahead. I can recall shopping for baby clothes with a measuring tape and other women looking at me, little did they know. I learned to appreciate that whilst motherly love is considered instinctive, the knowledge and skills to raise a new baby can be acquired even by a man trained in technical industrial engineering in a battle of survival. Whilst later I had the help from nannies allowing me to work and earn a living to provide for my family, they worked five day weeks under defined hours, so I quickly learned the role of father and mother for the majority of life's challenges and occasions.

It has always bothered me that even now, some 27 years later, very little has been written or formally done about the subject of maternal deaths in Canada. During this time, Kitty Lana has grown up to be a beautiful young woman like her mother, graduating from Queens University with an Honors BA and Business Diploma from the Smith School of business. Kitty would be so proud to see our daughter pursuing her career in Toronto in the Digital Media and Marketing field. Through my research I see that Canada is behind many countries of lesser wealth and prosperity, and world status, when it comes to dealing with maternal deaths, and the World Health Organization has been critical of Canada on this matter.

Ireland, my birth country where I grew up in a modest family of eight children including three sets of twins, which put us on the front page of one of the national newspapers, has a Maternal Mortality Rate (MMR) of half that of Canada and had ZERO MMR, that is NO maternal deaths in 2018 and 2019. The United Kingdom has for a number of years had a **legislated Confidential Enquiry Maternal Death** (CEMD) **Registry** with the objective of learning from these terrible tragedies and thus reducing their MMR. The Center for Disease Control in the U.S. (CDC) maintain that 60% of Maternal Deaths are avoidable. No one should have to lose a wife, mother and soulmate, in childbirth, especially if it is preventable or complications better managed.

I believe no woman should have to die giving birth in Canada. Canada can do better; Canada must do better. It is unacceptable and a terrible indictment that in today's age, in a country with our prosperity, excellent education and medical research capabilities, and focus on equity, diversity and inclusion, that our Maternal Death Rate is so high, and that worse, we have no consistent and reliable method across the country in how we define and measure Maternal Deaths, let alone study it. Whilst health care and its delivery in Canada is the responsibility of each province and territory, this should not impede our ability to learn from every maternal death in Canada and do what we can to prevent them in the future.

Canada has a committed group of experts who have been working hard together to learn from our international partners and put an end to preventable maternal deaths. They have published extensively on establishing a system of confidential enquiry into maternal deaths in Canada (i.e., Nov.2017 'Measuring Maternal Mortality and Morbidity in Canada' and Dec. 2019 '....An Update on the Establishment of a Confidential Enquiry System) similar to other countries who are world leaders in the area, such as the UK. The Canadian Foundation for Women's Health has identified this as a strategic priority and they are currently seeking funding from various sources to advance the hugely important efforts in this area. I have been in touch with them and offered to help them to fundraise, given my firsthand experience and personal story.

It's time for Canada to act! We speak of Human Rights and surely **every woman in Canada**, **every mother to be**, should not have to die giving birth. Families should not have to incur the pain and suffering as my family has experienced, and others who silently persevere to go on. Our children should not be denied the right and privilege of having a mother, and being nurtured and loved and raised by both loving parents.

If you read this story about Kitty Lai Ching Carr nee Wong and are surprised by the state of Maternal Deaths in Canada, then please let your local MP/MLA know and impress upon them that Canada can do better and needs to do better.

We need a national Confidential Enquiry System that will help us to understand and to learn from the stories of every woman who dies during pregnancy or in the postpartum period in Canada. Women in Canada deserve that, children in Canada deserve that, families in Canada deserve that and our society deserves that too. Support these efforts by donating to the Canadian Foundation for Women's Health (www.cfwh.org).

I have also reached out to our local MP, Mrs. Tracy Gray, and our local MLA, Mrs. Renee Merrifield (who is also a Health Critic), to challenge our Provincial and Federal Ministers of Health to accelerate and personally raise their efforts to have their Ministry of Health and Health Canada respectively establish, in partnership with the Society of Obstetricians and Gynaecologists of Canada and the Canadian Foundation for Women's Health, a Confidential Enquiry System into Maternal Deaths in Canada. I have also reached out to the Editor in Chief of the Globe and Mail, The National Post and The Washington Post and other select journalists.

Written by Paul M. Carr – former husband Kitty Lai Ching Carr. Paul is advocating for the establishment of a Confidential Enquiry System into Maternal Deaths in Canada and has reached out to experts at the Society of Obstetricians and Gynaecologists of Canada and the Canadian Foundation for Women's Health, who have been leading the efforts across Canada in this area.

Mr. Carr has established the Kitty Carr Fund at the Canadian Foundation for Women's Health (www.cfwh.org) in memory of his wife, and is donating \$100,000. The Kitty Carr Fund will support research and initiatives focused on prevention of maternal mortality in Canada. Mr. Carr is engaging many key business leaders in Canada as part of his campaign to help the CFWH to raise \$1M, which will enable the implementation of a program that works with all Provinces and Territories in Canada to review every maternal death and to advance our knowledge about risks, causes and prevention.

Paul is former President of the Electrical Div. of Guillevin International Co. headquartered in Montreal and spent 33 years of his career with Guillevin working his way up from Technical Sales to Management to Senior Management and Executive level. He is a registered Incorporated Engineer (I.Eng. MIET) with the Institute of Engineering Technology a global Engineering Institute in London England.