Michigan has participated in the CDC COVID-19 Pregnancy and Neonate Surveillance Project since March 2020. The purpose of this project is to identify people diagnosed with COVID-19 during pregnancy and follow them during pregnancy to identify disparities and better understand how COVID-19 affects pregnant people and their infants. In 2020, 1,288 pregnant people diagnosed with COVID-19 during pregnancy were identified for this cohort and included in this analysis.

### Racial Disparities

**3.4X**

Black pregnant persons were **3.4** times more likely to have a COVID-19 complication compared to white pregnant persons (5.7% among Black vs. 1.7% among white).

**2.5X**

Infants of Black parenting persons were **2.5** times more likely to be reported as low birthweight compared to infants of white parenting persons (16.0% among Black vs. 6.3% among white).

**1.8X**

Infants of parenting persons whose race is neither Black nor white were **1.8** times more likely to have their infant admitted to the NICU (12.3% among races other than Black or white vs. 7.0% among white).

**3.9X**

Black pregnant persons were **3.9** times more likely to develop acute respiratory distress syndrome as a COVID-19 complication than white pregnant persons (3.1% among Black vs. 0.8% among white).

**4.1X**

Black pregnant persons were **4.1** times more likely to need mechanical ventilation due to COVID-19 than white pregnant persons (2.9% among Black vs. 0.7% among white).

**3.0X**

Black pregnant persons were **3.0** times more likely to develop pneumonia as a COVID-19 complication than white pregnant persons (4.8% among Black vs. 1.6% among white).

All the comparisons on this page are statistically significant at the p=0.05 level.
Pregnant persons with a pre-pregnancy condition were 4.6 times more likely to develop a COVID-19 complication than those without a pre-pregnancy condition (6.1% among those with any pre-pregnancy condition vs. 1.3% among those without any pre-pregnancy condition).

<table>
<thead>
<tr>
<th>Pre-Pregnancy Conditions and Covid-19 Complications</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pregnant persons with a pre-pregnancy condition were 5.6 times more likely to develop pneumonia as a COVID-19 complication than those without a pre-pregnancy condition (6.2% among those with a pre-pregnancy condition vs. 1.1% among those without a pre-pregnancy condition).</td>
</tr>
<tr>
<td>Pregnant persons with pre-pregnancy chronic obstructive pulmonary disease (COPD) were 4.2 times more likely to develop a COVID-19 complication than those without pre-pregnancy COPD (8.3% among those with pre-pregnancy COPD vs. 2.0% among those without pre-pregnancy COPD).</td>
</tr>
<tr>
<td>Pregnant persons with pre-pregnancy COPD were 2.6 times more likely to develop pneumonia as a COVID-19 complication than those without pre-pregnancy COPD (6.3% among those with pre-pregnancy COPD vs. 2.4% among those without pre-pregnancy COPD).</td>
</tr>
<tr>
<td>Pregnant persons with pre-pregnancy chronic hypertension were 5.0 times more likely to develop a COVID-19 complication than those without pre-pregnancy hypertension (10.9% for those with pre-pregnancy hypertension vs. 2.2% for those without pre-pregnancy hypertension).</td>
</tr>
<tr>
<td>Pregnant persons with pre-pregnancy diabetes were 6.2 times more likely to develop a COVID-19 complication than those without pre-pregnancy diabetes (14.3% for those with pre-pregnancy diabetes vs. 2.3% for those without pre-pregnancy diabetes).</td>
</tr>
</tbody>
</table>

All the comparisons on this page are statistically significant at the p=0.05 level.
Data from the 2020 COVID-19 pregnancy cohort file were linked to 2020 birth records to distinguish differences between the live birth data for those with and without a reported COVID-19 diagnosis during pregnancy.

Disparities by Reported COVID-19 Diagnosis

- Birthing parent races other than white were 1.2 times more likely to be in the COVID-19 cohort compared to those without a COVID-19 diagnosis during pregnancy (33.3% and 27.9%, respectively).*

- The COVID-19 cohort was 1.1 times more likely to report Medicaid as the expected source of delivery payment than the non-COVID-19 cohort (44.8% and 41.1% of delivery hospitalizations, respectively).*

- Infants from the COVID-19 cohort were 1.1 times more likely to have a NICU admission than infants from the non-COVID-19 cohort (8.5% and 7.6%, respectively).

- The low birthweight percentage among infants within the COVID-19 cohort was slightly higher than that of infants within the non-COVID-19 cohort (10.2% and 9.0%, respectively).

*Denotes statistical significance at the p=0.05 level

For more data and resources on maternal health in Michigan, please visit: Michigan Maternal Mortality Surveillance Program.

For more information on COVID-19 during pregnancy, please visit: COVID-19 during Pregnancy | CDC.