

EARLY PRENATAL CARE

HEALTHY PEOPLE 2010 GOAL:

90% of all women will receive early prenatal care.

Definition of Indicator

Early prenatal care refers to the number and percent of infants born to women whose prenatal care began during the first trimester (the first three months) of pregnancy.

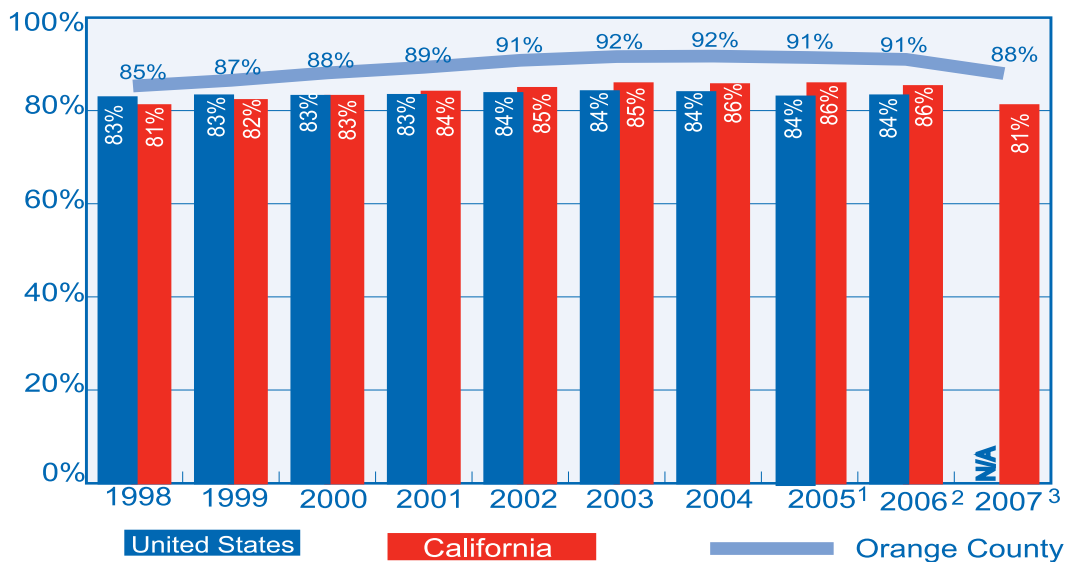
Findings

Preliminary data from 2007 indicate that 88% of Orange County mothers received prenatal care beginning in their first trimester. For the first time in the past 6 year period, Orange County did not meet the Healthy People 2010 goal of 90%. However, Orange County's rate is higher than the State percent of 81%.

STATEWIDE:

In 2007, 81.1% of mothers received prenatal care in the first trimester.³

Percent of Women that Received Early Prenatal Care in Orange County, California, and the United States*, 1998 to 2007



2007 California data were obtained from Center for Health Statistics, Vital Statistics System

*Source for U.S. data: <http://www.cdc.gov/nchs/data/nvsr>

¹⁻³ 2005-2007 Orange County data are preliminary.

Source: County of Orange Health Care Agency, Family Health Division, 2009

Trends

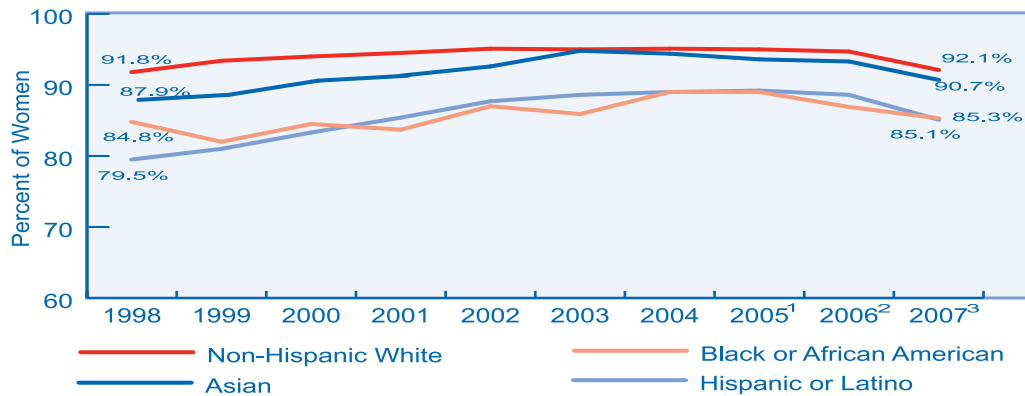
Between 1998 and 2007, the proportion of women receiving prenatal care in the first trimester increased by 2.7 percentage points, from 85.3% to 88.0%. Yet 12% of women still receive late or no care at all throughout their pregnancy. In Orange County, the number and percent of women receiving early prenatal care rose steadily and remained consistently high (nearly 92%) for about 5 years (2002 to 2006).

In the past ten years, all racial and ethnic groups have demonstrated an increase in the percentage of mothers receiving early prenatal care, with Hispanic or Latino mothers having an increase of 5.6 percentage points from 79.5% in 1998 to 85.1% in 2007. Among other ethnic groups, the increases in early prenatal care were Asian, up 2.8 percentage points, Black or African American, up 0.5; and Non-Hispanic White, up 0.3. However, compared to last years data (2006), all ethnicities have dropped by 2 or 3 percentage points.

RELATED INDICATORS:

- Substance-Exposed Infants
- Low Birth Weight
- Infant Mortality
- Immunization of Children
- Births to Teens
- Developmental Disabilities
- Nutritional Programs: WIC and CSFP

Percent of Women who Received Early Prenatal Care by Race and Ethnicity, 1998 to 2007



Note: 2006 and 2007 data have not yet been cleaned for race/ethnicity, and, therefore final data may reflect revisions.
 1-3, 2005-2007 data are preliminary.
 Expanded birth data for additional race/ethnicity categories are available in the Health Care Agency's annual Birth Outcomes data reports at <http://www.ochealthinfo.com/epi/statistics.htm>

Why is this Important?

Receiving early and ongoing prenatal care increases the chances of having a healthy, full-term, normal weight baby. Research shows that women who do not receive adequate, early prenatal care are more likely to give birth to low birth weight babies. Early prenatal care increases the opportunity for mothers to improve their health habits and for those habits to be monitored during the pregnancy by health care professionals, who can prevent, detect, and treat maternal and fetal medical problems.¹ It is also a cost-effective way to reduce the health care costs associated with neonatal intensive care services for low birth weight babies.

The benefits are increased most for mothers at risk of poor birth outcomes, such as teenage mothers and mothers living in poverty. Failure to obtain prenatal care may reflect a mother's indifference to her pregnancy, a lack of information, or a lack of access to health care or health insurance.²

What's Happening in Orange County?

What's Working:

- In addition to routine obstetric care, women are linked to the County Comprehensive Perinatal Services Program (CPSP), providers for pregnancy support services. This includes appropriate education and referrals in the areas of health education, nutrition and psychosocial services.
- The County continues to provide perinatal outreach and education targeting at-risk populations. The county maintains a contract with MOMs Orange County for administration of the Prenatal Care Guidance (PCG) program. Additionally, information is provided in venues such as health fairs, schools, community organized events, and health care provider offices.
- The County Maternal, Child and Adolescent Health (MCAH) Programs continue to promote preconception and inter-conception care within county and clinic services and community health care providers.
- The County MCAH staff have just completed the Title V MCAH Needs Assessment and will address the various identified health issues affecting women of child bearing age and children.

✓ See page 136 in Supplemental Tables for additional data

NATIONWIDE:

In 2006, 84% percent of all mothers began prenatal care in the first trimester of pregnancy.⁴

DATA SOURCES:

Orange County Health Care Agency/ Epidemiology and Assessment
 California Department of Health Services, Birth Records 2005
 Center for Disease Control and Prevention, National Vital Statistics Reports, 2004, 2005

NOTES:

¹Orange County Community Indicators, 2009
²Annie E. Casey Foundation, Kids Count Data Book, 1999
³California Department of Public Health, March 2009
⁴County of Orange Health Care Agency, Epidemiology & Assessment, 2008