



# Selected Maternal and Infant Health Indicators From The 2005 Los Angeles Mommy and Baby Project

## The Problem

- Over 150,000 babies are born in Los Angeles County every year
- Our infant mortality, low birth weight, and preterm birth rates have not met Healthy People 2010 goals
- Racial/ethnic and geographic disparities in birth outcomes are ongoing challenges
- Los Angeles County did not have surveillance system to monitor the maternal/infant health indicators related to poor birth outcomes

## Objective

- To identify factors that may relate to poor birth outcomes (low birth weight, preterm births), especially focuses on those factors that may be preventable and can be addressed through public health and system changes
- To establish a surveillance system in Los Angeles County to monitor maternal/infant health indicators related to poor birth outcomes
- To assist local health department, community-based organizations in designing evidence-based program and policy/planning process

## Methods

**Participants:** Women who recently gave birth in Los Angeles County in 2005

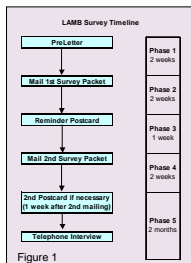
**Design:** Population-based stratified sampling; over sampling on low birth weight and pre-term births (LBW/PT) as well as African American, Asian/Pacific Islander, and Native American births

**Procedure:** LAMB Project followed CDC PRAMS procedures as described in figure 1. Surveys were mailed to participants with telephone follow-up. The survey was administered in English, Spanish, and Chinese with translators available for other languages. To enhance the response rate, all respondents were given a \$20 gift certificate.

**Instrument:** The survey examined areas that are known to have an impact on birth outcomes, including

- Preconception health
- Prenatal care
- Maternal medical conditions
- Psychosocial risk factors
- Behavioral risk factors

**Analysis:** Data were linked with information from birth and death certificates



## Results

Close to 5,500 women responded to the survey. The adjusted response rate was close to 50%. Summary of selected indicators is included in the tables below.

**Table 1. Preconception Health Indicators**

	Percent	95 % CI	Estimated # of pregnant women in LA County
<b>Preconception Health</b>			
Uninsured	35.6%	33.4 – 38.0	53,208
Unintended pregnancy	40.0%	37.7 – 42.2	59,784
Did not take multi-vitamin	57.0%	54.9 – 59.3	85,193
Smoking six months prior to becoming pregnant	9.2%	8.0 – 10.4	13,750
<b>Obstetrical history</b>			
Prior miscarriage	16.6%	14.9 – 18.1	24,810
Prior preterm or low birth weight birth	9.4%	8.1 – 10.9	14,049
<b>Maternal medical condition prior to pregnancy</b>			
Overweight	38.1%	35.8 – 40.3	58,238
Anemia	9.8%	8.5 – 11.2	14,647
Periodontal disease	5.4%	4.3 – 6.4	8,070
High blood pressure	2.6%	1.9 – 3.4	3,886
Diabetes	3.0%	2.2 – 3.9	4,483

**Table 2. Prenatal Care**

	Percent	95 % CI	
Inadequate prenatal care	11.6%	9.9 – 13.4	17,337
Late entry into prenatal care	7.2%	6.0 – 8.4	10,761

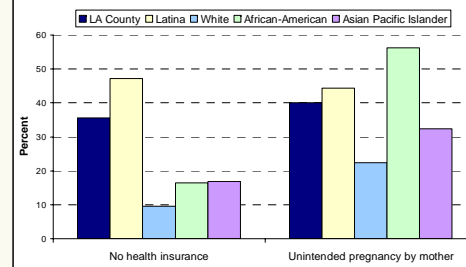
**Table 3. Psychosocial and Behavior Risk Factors**

	Percent	95 % CI	
Depressed during pregnancy	34.0%	31.7 – 36.2	50,817
Reported pregnancy as a hard time of their life	17.2%	15.5 – 18.8	25,707
Abused by partner during pregnancy	2.4%	1.7 – 3.1	3,587
Smoked during pregnancy	2.8%	2.2 – 3.5	4,184
Exposed to second hand smoke	10.8%	9.4 – 12.3	16,141

**Table 4. Infant Health and Postpartum Indicators**

	Percent	95 % CI	
Ever breastfed	77.6%	75.6 – 79.6	115,982
Baby slept on his/her back	62.8%	60.5 – 65.0	93,862
Baby slept in bed with mother or another person	76.4%	74.5 – 78.3	114,188
Depressed after baby was born	51.8%	49.1 – 54.5	77,421
Had a postpartum checkup	88.4%	86.9 – 89.9	132,124

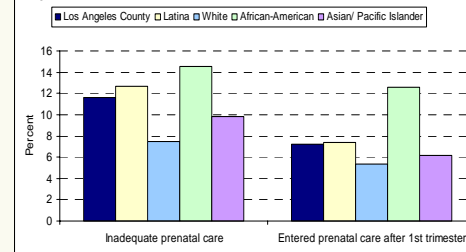
**Figure 2. Preconception Health Indicators**



- About 36% of all mothers had no health insurance before pregnancy.
- Latina mothers were more likely to be uninsured.
- The Healthy People 2010 Objective: increase the proportion of people with health insurance to 100%.

- In Los Angeles County, about 40% of all pregnancies were unintended.
- Latina and African-American mothers were more likely to report pregnancy as unintended.
- Women with unintended pregnancies are less likely to receive timely prenatal care, and their infants are more likely to lack sufficient resources for healthy development.
- The Healthy People 2010 Objective: increase the proportion of pregnancies that are intended to 70 percent.

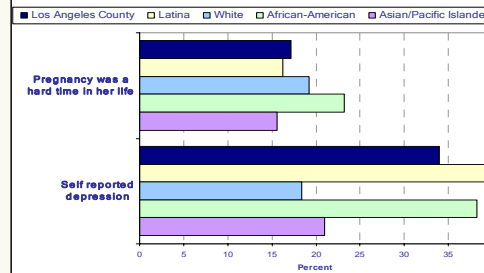
**Figure 3. Prenatal Care Indicators**



- The Healthy People 2010 Objective: increase the proportion of pregnant women who received early and adequate prenatal care to 90 percent.

- Los Angeles County overall reached the target for early entry into prenatal care (92.8%).
- However, African-American mothers were more likely to enter prenatal care after first trimester.
- The Adequacy of Prenatal Care Utilization Index (APNCU) measures two dimensions of care: the initiation of care and the use of prenatal services once care has begun.
- Better pregnancy planning and removing socioeconomic barriers to health care access is essential to early and adequate prenatal care.

**Figure 4. Psychosocial Risk Factors during Pregnancy**



- A significant number of mothers reported having depression or having a hard time during pregnancy.
- Latinas and African-American mothers were more likely to report depression during pregnancy
- Despite the self-reported depression, only a few mothers were diagnosed.
- Better screening for depression during pregnancy is essential.

## Innovations in 2007

- Innovations in 2007 LAMB
- Multilevel sampling design
  - Expanded focus
    - Preconception & interconception health
    - Stress & resilience
    - Neighborhood environment
    - Racism
  - Academic-public health partnership, community support

