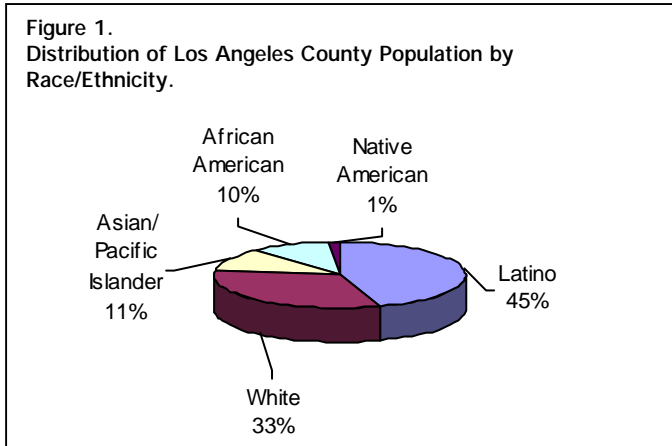


Los Angeles County Maternal and Child Health 2003 Fact Sheet

How is Los Angeles County unique?

- Los Angeles County (L.A. County) covers just under 4,081 square miles, but has over 10 million residents – greater than the population of 43 of the 50 states!
- Over 150,000 babies were born in 2003 *or*
 - One of every 27 babies born in the U.S.
 - One of every 4 babies born in CA



- More than half of its diverse population is comprised of racial/ethnic minorities (Figure 1).
- Nearly 1 in 3 residents report that they do not speak English well or at all.
- Over 1.8 million individuals and families live below federal poverty thresholds - \$9,393 for an individual and \$18,810 for a family of 4.

L.A. County made progress in maternal and child health in 2003, and we can do even more.

- L.A. County's infant mortality rate, percent of low and very low birthweight births, percent of preterm births, and teen birth rate were below national averages, but failed to meet *Healthy People 2010* (HP 2010) goals (Table 1).
- 90% of L.A. County mothers began prenatal care in the first trimester, meeting the HP 2010 goal.
- The birth rate for 15- to 19- year olds decreased for the eleventh straight year, mirroring state and national trends.
- Still, over 10,000 babies weighing 5.5 pounds or less are born each year. These vulnerable babies comprised:
 - 21% of live births to mothers who had no prenatal care

- 13% of live births to African Americans
- 9% of live births to mothers 35 years and older
- 8% of live births to 15- to 19-year olds
- 7% of live births to mothers on Medi-Cal.¹

- Compared to other California counties, L.A. County has one of the higher teen birth rates.
 - Birth rates for 15- to 19- year olds were highest for Hispanics (59.7 births/1,000 females) and African Americans (39.1 births/1,000 females).
 - 19% of 15- to 19- year olds have given birth to two or more children.

	LAC	CA	US	HP2010
IMR ¹	5.4	5.2	6.9	4.5
FMR ²	4.9	4.8	-	4.1
LBW	7.1%	6.6%	7.9%	5%
VLBW	1.3%	1.2%	1.4%	0.9%
PTB	10.5%	10.2%	12.3%	7.8%
1st Trimester PNC	90%	87%	84%	90%
Teen Birth Rate ³	41.5	38.9	41.7	-

¹IMR=Infant mortality rate. Deaths at less than 365 days of age per 1,000 live births.
²FMR=Fetal Morality rate. Deaths at 20 weeks or more gestation per 1,000 live births + fetal deaths.
 LBW=Low birthweight (less than 5 pounds, 8 oz)
 VLBW=Very low birthweight (less than 3 pounds, 5 oz)
 PTB=Preterm birth (less than 37 weeks gestation)
³ Per 1,000 adolescent females aged 15 – 19

Improving health by improving access to quality Health Care

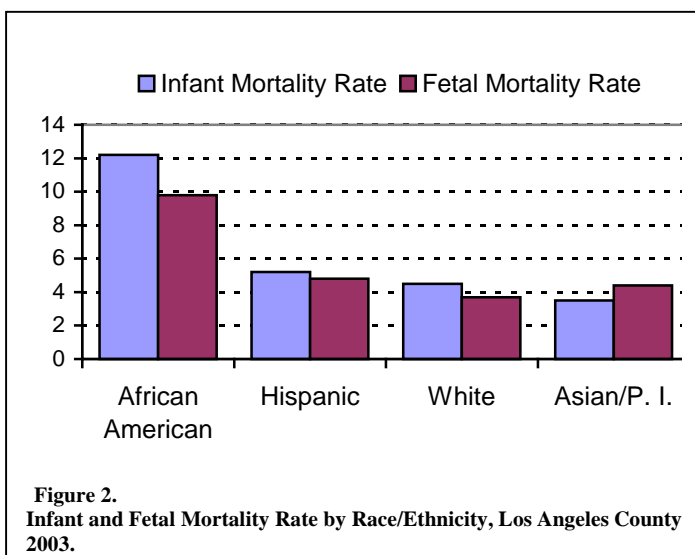
- A woman's health and care before she becomes pregnant affects her baby.
 - 85% of 18- to 44- year old women in Los Angeles had a usual source of care in 2003, but 32% lacked health insurance during all or part of the year and 18% either delayed or did not obtain care.
 - A recent study of Service Planning Area (SPA) 1 found that mothers who delivered low birthweight or preterm infants were twice as likely to be uninsured before becoming pregnant and nearly four times more likely to have had a previous low birthweight or preterm birth.
- Mothers whose prenatal care was paid through Medi-Cal began care later and had worse

outcomes than mothers who had another source of payment.

- o A lower proportion of mothers on Medi-Cal began prenatal care in the first trimester than mothers not on Medi-Cal (87% vs. 93%, respectively).¹
- o Preterm births comprised 10.9% of births to mothers on Medi-Cal compared to 9.9% of births to mothers not on Medi-Cal.¹
- Sources of infection and inflammation are strongly linked to poor pregnancy outcomes.
 - o *Chlamydia trachomatis*, the most commonly reported sexually transmitted infection, may lead to pelvic inflammatory disease, ectopic pregnancy, preterm birth, perinatal infection, and infertility.
 - o About 5% to 14% of routinely screened females aged 16 to 20 test positive for chlamydia. Among sexually active females aged 16 to 20, only 28% with commercial health insurance and 38% on Medicaid were screened for chlamydia in 2001.
 - o Periodontal (dental) disease may increase the risk of preterm delivery.
 - o 28% of pregnant L.A. County residents aged 18 to 44 could not afford needed dental care and 20% had not seen a dentist in as long as 2 years.

Improving health by reducing racial/ethnic disparities

- African Americans had the highest rate of infant mortality and fetal mortality of all racial/ethnic groups countywide (12.2 and 9.8/1,000 live births, respectively) (Figure 2).



Improving health by reducing geographic disparities

Infant mortality rates varied from 4.5 deaths/1,000 live births in SPA 5 (West) to as much as 9.7 deaths/1,000 live births in SPA 1 (Antelope Valley).

A recent study done in SPA 1 found that women who delivered low birth weight or preterm babies were:

- o Twice as likely not to receive “early and adequate” prenatal care.
- o Twice as likely to have high blood pressure during pregnancy.
- o Three times as likely not to gain the ideal amount of weight during pregnancy (normal or obese prepregnancy weight).
- SPAs 1 (Antelope Valley) and 6 (South) consistently had some of the highest rates of adverse pregnancy indicators in the County, including low birthweight births, preterm births, late prenatal care, and high teen birth rates (Table 2).

SPA	IMR ¹	FMR ²	LBW	PTB	1 st Trimester PNC
1 AV	9.7	4.0	7.8%	12.2%	85%
2 SFV	4.3	4.5	6.6%	10.2%	93%
3 SGV	4.9	4.2	6.8%	9.4%	90%
4 Metro	5.1	5.5	6.9%	10.0%	91%
5 West	4.5	4.3	7.1%	9.0%	95%
6 South	6.5	5.7	8.4%	12.2%	86%
7 East	4.8	5.6	6.5%	11.0%	88%
8 S. Bay	5.9	5.0	7.2%	10.0%	91%
HP2010 Goals	4.5	4.1	5%	7.8%	90%

¹IMR=Infant mortality rate. Deaths at less than 365 days of age per 1,000 live births.
²FMR=Fetal Morality rate. Deaths at 20 weeks or more gestation per 1,000 live births + fetal deaths.
 LBW=Low birthweight (5.5 pounds or less)
 PTB=Preterm birth (less than 37 weeks gestation)

¹Includes CPSP and regular Medi-Cal

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