

# PRENATAL CARE

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Inadequate prenatal care, including late initiation of care, infrequent prenatal visits, or no care at all, is associated with poor infant outcomes. Mothers with late or no prenatal care are more likely to have low birth weight or preterm infants, and are at increased risk for pregnancy-related mortality and complications of childbirth. Two measures are used to describe prenatal care. First trimester initiation looks only at when women begin prenatal care. Adequate prenatal care incorporates both when prenatal care began and total number of visits (APNCU Index; see Appendix A: Glossary, adequate prenatal care).

## **First Trimester Initiation**

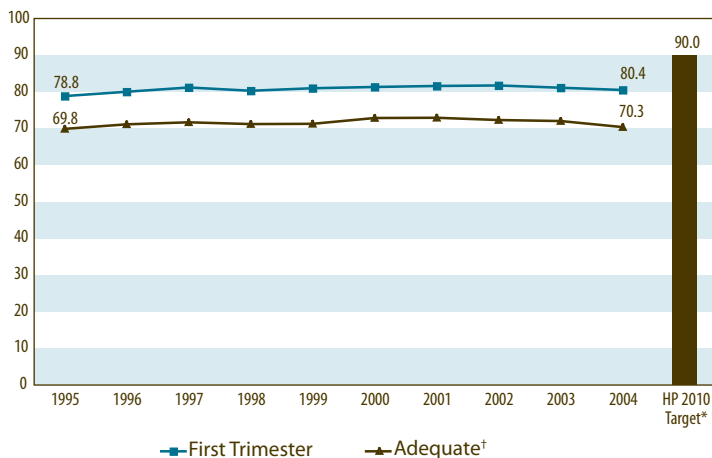
- In 2004, first trimester prenatal care initiation was 80.4 percent for Oregon, compared to 83.9 percent for the U.S.<sup>23</sup>
- Oregon's rate of first trimester prenatal care initiation was significantly lower than the Healthy People 2010 target of 90 percent.
- Oregon's rate of first trimester prenatal care initiation had a small but significant increase between 1995 and 2002. Since that time, however, there was a small but significant decline.

## **Adequate Prenatal Care**

- In 2004, adequate prenatal care was 70.3 percent for Oregon, compared to 75.2 percent for the U.S.<sup>23</sup>
- Oregon's rate of adequate prenatal care was significantly lower than the Healthy People 2010 target of 90 percent.
- The percent of women in Oregon with adequate prenatal care increased significantly between 1995 and 2001, but has declined significantly since that time.
- In 2004, nearly one-third (29.7 percent) of Oregon women who had a baby received less than adequate prenatal care.

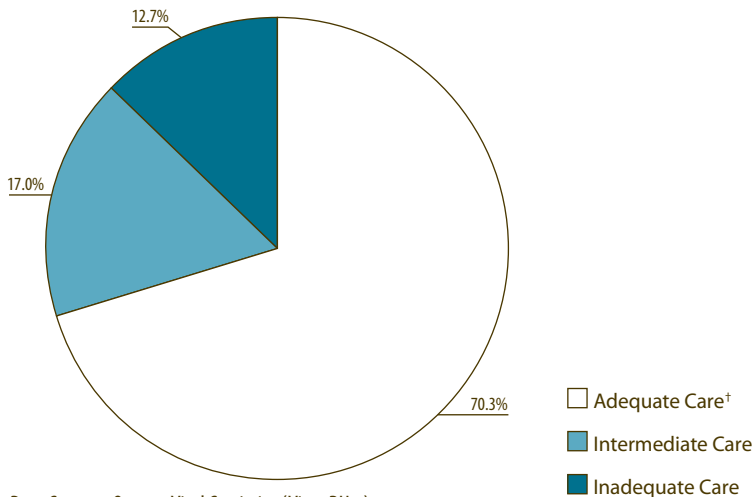
# CHAPTER 3: PERINATAL HEALTH

## First Trimester Initiation & Adequate Prenatal Care by Year, Oregon, 1995-2004



\*The HP 2010 Target of 90% applies to both First Trimester and Adequate Prenatal Care.  
Data Source: Oregon Vital Statistics (Vista PHw)

## Adequacy of Prenatal Care, Oregon, 2004



Data Source: Oregon Vital Statistics (Vista PHw)

† Adequate prenatal care is a combination of Adequate and Intensive as defined by the Adequacy of Prenatal Care Utilization (APNCU) Index, also referred to as the Kotelchuck Index.

# PRENATAL CARE (CONTINUED)

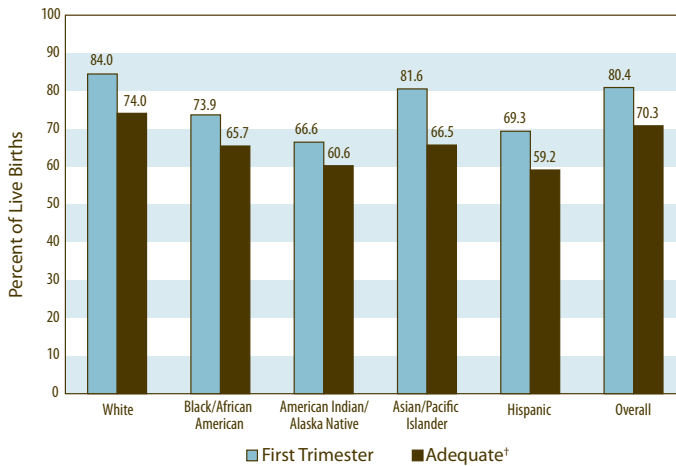
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Women who are more likely to obtain late and/or inadequate prenatal care include: women with low socio-economic status, lower education, young maternal age, and minority women. These disparities are of particular concern given the increased prevalence of maternal complications and poor birth outcomes within these groups.<sup>24</sup>

- In 2004, white mothers had the highest prevalence of both first trimester prenatal care initiation (84.0 percent) and adequate prenatal care (74.0 percent) of any race/ethnic group.
- In 2004, Hispanic and American Indian/Alaska Native mothers were less likely to receive either first trimester or adequate prenatal care compared to mothers of other race/ethnic groups.
- In 2004, approximately 40% of both Hispanic and American Indian/Alaska Native women did not receive adequate prenatal care.
- The percent of women receiving both first trimester and adequate prenatal care significantly increased with age. In 2004, first trimester prenatal care initiation was 44.9 percent higher among women 25 years or older compared to women less than 18 years of age and adequate prenatal care was 33.9 percent higher.

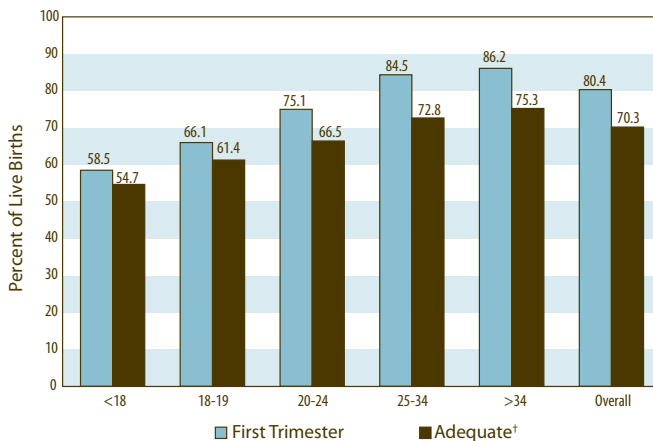
# CHAPTER 3: PERINATAL HEALTH

## First Trimester Initiation & Adequate Prenatal Care by Race/Ethnicity, Oregon, 2004



Data Source: Oregon Vital Statistics (Vista PHw)

## First Trimester Initiation & Adequate Prenatal Care by Age, Oregon, 2004



Data Source: Oregon Vital Statistics (Vista PHw)

† Adequate prenatal care is a combination of Adequate and Intensive as defined by the Adequacy of Prenatal Care Utilization (APNCU) Index, also referred to as the Kotelchuck Index.