FAMILY PLANNING, MATERNAL AND CHILD HEALTH — OVERVIEW

Family Planning

Women in the U.S. spend nearly 40 years, from menarche to menopause, at potential for pregnancy. Although most women are pregnant or trying to become pregnant for only a small portion of their lives, women typically spend about three-quarters of their reproductive years trying to avoid pregnancy.

An unintended pregnancy is a pregnancy that is either mistimed or unwanted at the time of conception. Unintended pregnancy is associated with an increased risk of morbidity for women, and with health behaviors during pregnancy that are associated with adverse effects. Women who can plan the number and timing of the birth of their children enjoy improved health, experience fewer unplanned pregnancies and births, and have lower rates of abortions.

In addition, women who have control over their fertility have a chance to attain more education and find employment (Chandra 2005).

Maternal and Child Health

The health of women before, during and between pregnancies, as well as the healthcare services they receive, are a critically important predictor of the health of the next generation.

According to a 2006 report by the Centers for Disease Control and Prevention (CDC), progress in the United States to improve pregnancy outcomes, including low birth weight, premature birth, and infant mortality has slowed, in part, because of inconsistent delivery and implementation of interventions before pregnancy to detect, treat, and help women modify behaviors, health conditions, and risk factors that contribute to adverse maternal and infant outcomes (CDC 2006).
Who is most impacted—live births

- Since 2000, the number of live births among North Inland region residents has increased from 7,865 to 8,605, a 9.4% increase and more than twice the overall San Diego County rate of 3.7%.

- The majority of births, 53.0%, were among females aged 25 to 34 years in 2005.

- Whites and Latinas accounted for 39.8% and 38.9% of 2005 births, respectively.

- Since 2000, the number of births to girls ages 15 to 17 has increased by 3.3%, from 212 to 219.

- Almost 80% of births to girls ages 15 to 17 are among Latinas.
Who is most impacted—prenatal care

- Since 2000, mothers beginning prenatal care during their first trimester increased from 81.5% to 86.0%, a 5.5% increase.
- Only 76.8% percent of mothers ages 15 to 24 received first trimester prenatal care in 2005.
- Latina and African American mothers received lower levels of first trimester prenatal care, 77.9% and 81.8%, respectively.
Who is most impacted—preterm births

Preterm births are births occurring prior to 37 completed weeks of gestation.

- Since 2000, the proportion of preterm births in North Inland region increased slightly from 9.9% to 10.3%.
- In 2005, 844 babies were born preterm to North Inland region residents.
- In 2005, the proportion of preterm births were highest among females aged 35 or older, 11.9%.
- African American mothers have the highest proportion of preterm births, 15.8%.

* Rates not calculated for fewer than 5 cases.