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Adverse birth conditions

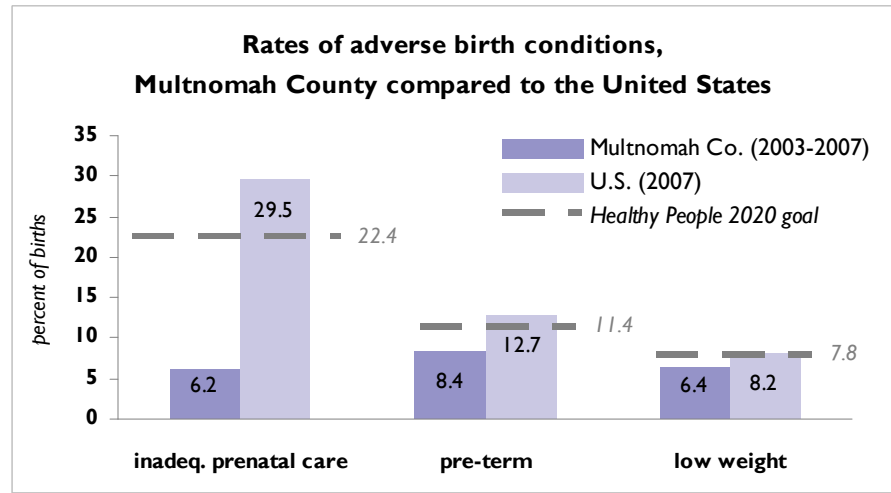
The conditions in which infants are born are important measures of a community's health status. Birth sets the stage for the rest of a person's life. The conditions of birth affect not only infants but also their families and the community at large because of the emotional and monetary costs of caring for people with special needs.

This Community Health Assessment Quarterly explores the conditions of births to Multnomah County residents between 2003 and 2007 (of which there were 48,762). It looks at three conditions: inadequate prenatal care, low birthweight and pre-term delivery. For each of these conditions, it compares Multnomah County to national standards and examines differences among racial groups. The numbers are taken from the most recent finalized data from the Oregon Health Authority and the National Center for Health Statistics.¹

Overall, Multnomah County compares favorably, but there are striking differences between racial groups. The document concludes by discussing how to promote healthy birth conditions for all residents.

What is an adverse condition?

Things that put the health of a mother or infant's health at risk are considered "adverse birth conditions." Three conditions that have a powerful effect on infant health are: prenatal care, gestational age (how much time the fetus had to grow before being born) and birthweight. These factors can influence issues such as learning ability, life expectancy and risk of getting certain diseases as an adult.



Prenatal care

Prenatal care can identify and correct issues that may put a pregnant woman or her fetus in danger. At prenatal visits, a healthcare provider monitors a pregnant woman's health and the fetus' development and provides counseling, education, immunizations and medical treatment.

For the statistics presented here, prenatal care is considered "adequate" if at least one visit was made during the first trimester of pregnancy and there were at least five total visits during the pregnancy. The first trimester includes the 12 weeks following a pregnant woman's last menstrual period.

Pre-term birth (gestational age)

A birth is considered preterm, or "premature," when the infant is born three weeks or more before the due date. Premature infants are more likely to have health problems than infants who are carried to full term (40 weeks). Some of the most common problems are hearing and

vision impairment, cerebral palsy and mental disabilities.²

Low birthweight

Infants who weigh less than 5.5 pounds (2,500 grams) at birth are considered to have a low birthweight. These infants are at increased risk of illness and death and may be more likely to have diabetes and heart problems as adults.³

A county of healthy births . . .

Over the five years of data presented here, Multnomah County had relatively low rates of inadequate prenatal care, preterm birth and low birthweight. These rates are similar to the state's overall rates.

The county compares favorably to the U.S. as a whole and to the Healthy People 2020 goals,⁴ a set of ambitious national health benchmarks (see graph above). Because these are adverse or unhealthy conditions, being *below* the benchmark is a positive indicator of community health.

... But racial disparities persist

However, there are differences in the rates of adverse birth conditions among racial groups (see graph at right).

Whites have the most favorable rates. Asian/Pacific Islander people fare slightly worse than white people and American Indian/Alaska native and black/African American people have consistently poorer outcomes.*

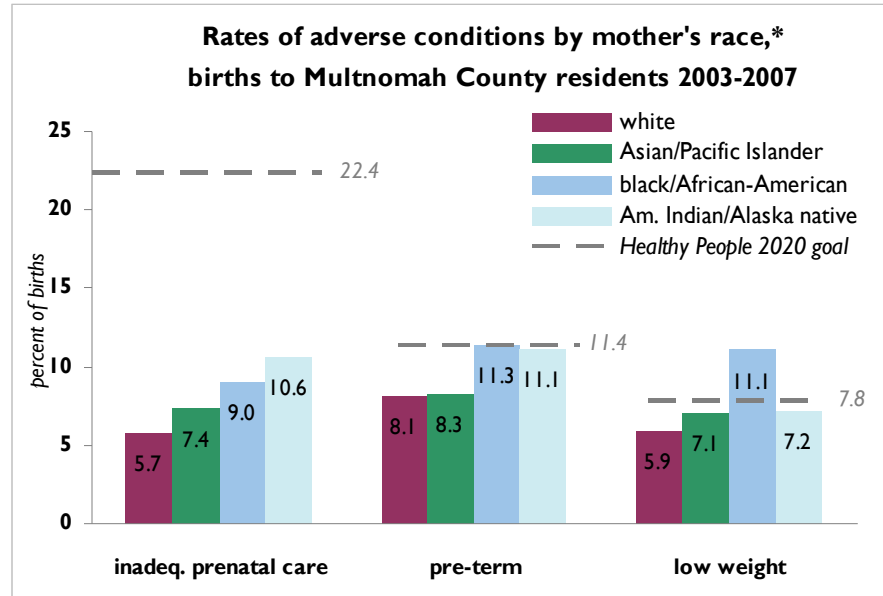
In most cases, the rates for the various racial groups still meet (fall below) the Healthy People 2020 goals. But rates of low birthweight to black/African American women are well above the target and above other groups' rates.

This unequal distribution (or "disparity") in Multnomah County mirrors national trends. Among racial groups, pregnancies to black women have the highest rates of pre-term birth and low birthweight. This gap between racial groups has persisted through recent decades.⁵

The roots of racial disparities

Racial disparities result from the conditions people live in rather than their genetic make-up. Racial disparities exist even among people of the same socioeconomic status, meaning that race has an influence over and above income, occupation and education.

Experiencing racial discrimination—a stressful experience reported by many black women—is also associated with adverse birth



conditions.⁶ Stress has a strong influence on adverse birth outcomes. For example, the body's physiological response to stress includes hormones that can bring on early labor.

The course of a woman's pregnancy can be affected by events that have occurred over the course of her life. This means that the stress of disadvantage—which could be due to race, poverty or other factors—during childhood hurts future generations.

Making births healthy

Every infant deserves a healthy beginning. Improving the conditions of birth demands increasing the proportion of pregnant women

who get adequate prenatal care and improving conditions before pregnancy ("pre-conception").

The many programs that help pregnant women access prenatal care can expand their reach, but support is also needed for more than the nine months of pregnancy. Creating healthy conditions for all births requires improving health-care delivery, strengthening families, and communities and reforming social and economic systems that limit people's opportunity to pursue a healthy life.⁵

* These statistics include people of both Hispanic and non-Hispanic origin within each racial group. For U.S. government reporting purposes, Hispanic origin is an ethnic rather than racial category.

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