

Adequacy of Prenatal Care

Early and regular prenatal care visits to health care providers are important for the health of both mother and infant. Health care providers have the opportunity to instruct expecting parents on nutrition, exercise, avoidance of tobacco, alcohol and drugs, the benefits of breastfeeding and to monitor for prenatal risks factors.

The Healthy People 2020 initiative has set a national goal of increasing the proportion of pregnant women initiating prenatal care within the first trimester of pregnancy from 70.8 percent in 2007 to 77.9 percent in 2020 [1]. Since 2007, the proportion of pregnant women residing in Kansas initiating prenatal care in the first trimester has steadily increased from 72.4 percent to 77.3 percent in 2011 [2].

Expectant mothers who begin prenatal care in the third trimester or receive no prenatal care are three times more likely to deliver an infant with low birth weight and their infant is five times more likely to die. Adequacy of prenatal care (defined by the frequency and timing of prenatal visits) has been correlated with positive birth outcomes [3].

Kansas Highlights

In 2011, there were 39,628 live births. Data were not available for 1,855 of the 2011 births for calculation of the Adequacy of Prenatal Care Utilization index (APNCU) [4]. Of the 37,773 births with calculated APNCU, White non-Hispanic mothers had the highest percentage receiving adequate plus and adequate prenatal care and the lowest percentage receiving less than adequate care than the other population groups. Black non-Hispanic and Hispanic mothers had the highest percentages receiving less than adequate prenatal care (intermediate +inadequate) (Table 1) [5].

Table 1. Number and Percentage of APNCU by Selected Population Group, Kansas, 2011

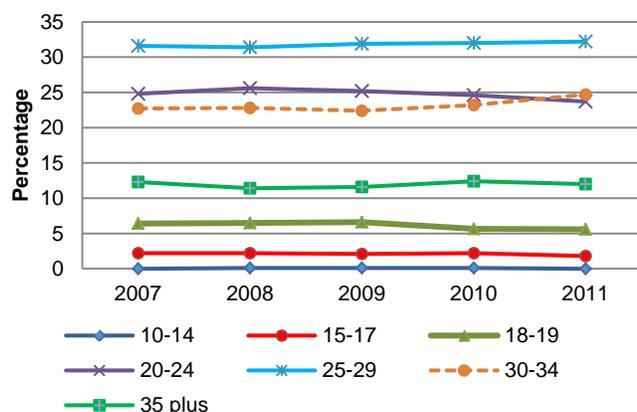
Population Group	Adequate Plus	Adequate	Intermediate	Inadequate	Not Stated
White non-Hispanic	9,548 (33.6%)	14,163 (49.9%)	1,251 (4.4%)	2,555 (9.0%)	864 (3.0%)
Black non-Hispanic	713 (26.3%)	1,053 (38.9%)	141 (5.2%)	547 (20.2%)	254 (9.4%)
Native American non-Hispanic	65 (28.4%)	91 (39.7%)	18 (7.86%)	45 (19.7%)	10 (4.4%)
Asian/Hawaiian and other Pacific Islander non-Hispanic	325 (28.7%)	549 (48.5%)	64 (5.7%)	149 (13.2%)	45 (4.0%)
Other non-Hispanic	39 (15.2%)	71 (27.6%)	13 (5.1%)	48 (18.7%)	86 (33.5%)
Hispanic any Race	1,313 (20.7%)	2,490 (39.6%)	502 (8.0%)	1,418 (22.5%)	570 (9.1%)

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Trends

Figure 1. Percentage of Kansas Females Receiving Adequate Prenatal Care by Age-group, Kansas, 2007-2011

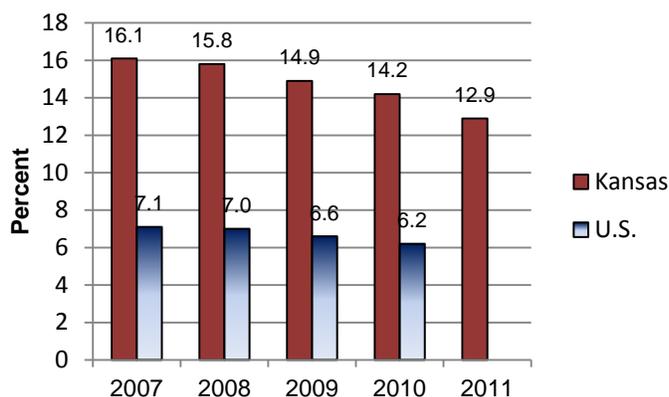


About 82 percent of Kansas resident females with available prenatal care information received adequate prenatal care in 2011[3]. The percentage of Kansas females receiving adequate prenatal care was stable within age-groups from 2007 to 2011. However, the percentage of females receiving adequate prenatal care increased by age from 10 through 29 years of age. The lowest percentage receiving adequate prenatal care was among adolescents and teens (Figure 1).

State and National Comparison

- The percentage of births to mothers receiving late (prenatal care began in the third trimester) or no prenatal care in the U.S. and Kansas has been decreasing since 2007. U.S. data for 2011 was not available. (Figure2)[1, 5].
- The percentages of mothers in Kansas receiving late or no prenatal care were at least twice as high as the national percentages from 2007 to 2010.

Figure 2. Percentage of Births to Mothers Receiving Late or No Prenatal Care in Kansas and the U.S., 2007-2011



Authored By: Cathryn Savage, Greg Crawford

References:

- (1) Healthy People 2020 Goals and Objectives [Internet] Department of Health and Human Services. [Cited 16 Dec. 2011; Updated: 23 Nov 2011]. Available from: <http://www.healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=26>.
- (2) Oakley D, Crawford G, Savage C. 2011 Annual Summary of Kansas Vital Statistics. Topeka, KS: Kansas Department of Health and Environment. 2012.
- (3) Late or No Prenatal Care. Child Trends Databank, November 2012. Available from: <http://www.childtrendsdatabank.org/?q=node/214>.
- (4) Kotelchuck M. Evaluation of Kessner Adequacy of Prenatal Care Index and a proposed Adequacy of Prenatal Care Utilization Index. American Journal of Public Health, 1994; 84; 1414-1420.
- (5) Savage C, Crawford G, Moyer C. Adequacy of Prenatal Care Utilization Index, Kansas, 2011. Kansas Department of Health and Environment. 2012.