



Overview

Ensuring women receive prenatal care during their first trimester (early) is important in supporting healthy mothers, children, and families. Early prenatal care allows women and their health care providers to identify and, when possible, treat or correct health problems and health-compromising behaviors that can be particularly damaging during the initial stages of fetal development. Research has shown that early and regular prenatal care is an accepted strategy to improve health outcomes of pregnancy for mothers and infants.¹ Common barriers to getting prenatal care as early as desired or at all include financial barriers, transportation issues, delayed awareness of pregnancy and difficulties accessing care.²

The percent of Sonoma County births receiving early prenatal care has decreased significantly since 2000-2002. The Healthy People 2020 national health target is to increase the proportion of pregnant women who receive prenatal care in the first trimester to 77.9%. While the overall rate for the county meets this goal, disparities in early entry into prenatal care continue among teen births, births to non-white mothers and Medi-Cal births.

Trend

- The rate of early entry into prenatal care (first trimester) among Sonoma County births decreased significantly from 2000-2002 to 2011-2013.
- The rate of early entry into prenatal care in Sonoma County is similar to California, which has also experienced a significant decrease over the time period.

Figure 1. Percent births receiving first trimester prenatal care, three year moving average— Sonoma County and California 2000-2013

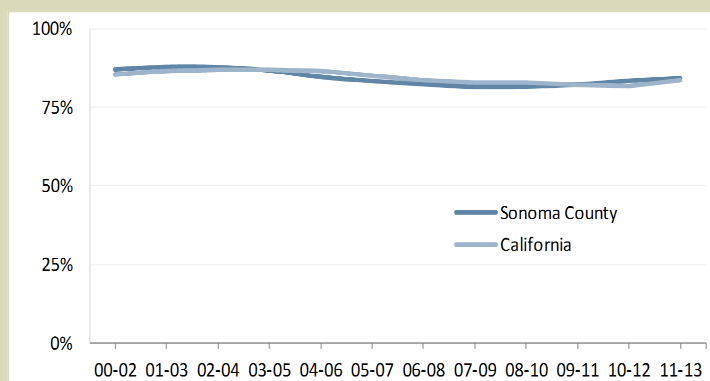
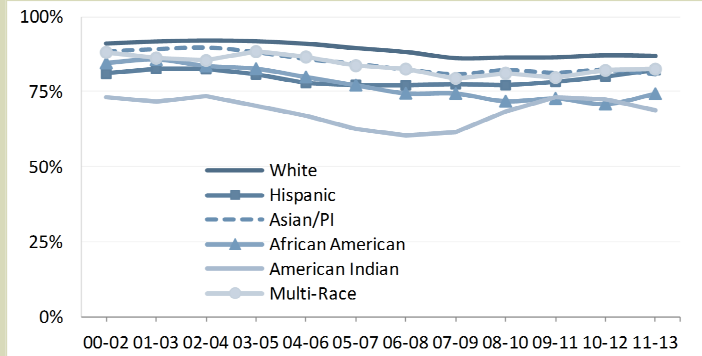


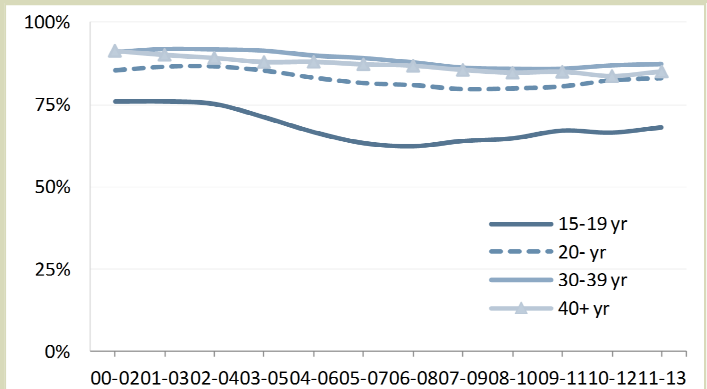
Figure 2. Percent births receiving first trimester prenatal care by mother's race/ethnicity, three year moving average— Sonoma County 2000-2013



Race/Ethnicity

- The rate of early entry into prenatal care decreased significantly among births to white, Asian/Pacific Islander and African American mothers during the time period.
- The percent of births with early entry into prenatal care was significantly higher for white mothers than for mothers of other race/ethnicities. The lowest rate was among births to American Indian mothers.

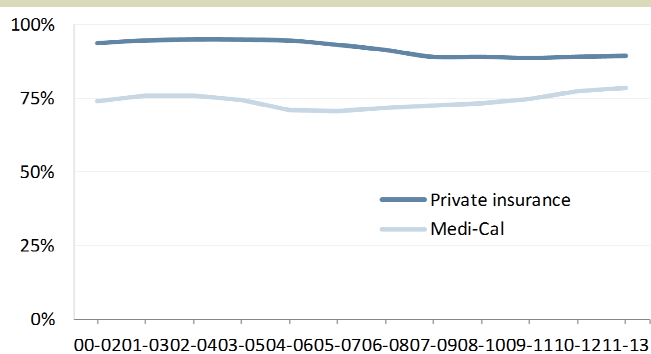
Figure 3. Percent births receiving first trimester prenatal care by mother's age, three year moving average— Sonoma County 2000-2013



Age of Mother

- The percent of births to teens who received early prenatal care continues to be significantly lower than that of older mothers (Figure 2).
- From 2000-2002 to 2011-2013 the percent of births that received early prenatal care decreased significantly among births to mothers of all age categories.

Figure 4. Percent births receiving first trimester prenatal care by pay source, three year moving average— Sonoma County 2000-2013



Pay Source

- From 2000-2002 to 2011-2013 rates of early entry into prenatal care decreased significantly for private insurance funded births but did not change significantly for Medi-Cal funded deliveries.
- The rate of early entry into prenatal care continued to be significantly higher for births paid by private insurance than births paid by Medi-Cal.

Table 1. Characteristics of births receiving first trimester prenatal care, three year moving average— Sonoma County 2000-2013

	2000-2002	2001-2003	2002-2004	2003-2005	2004-2006	2005-2007	2006-2008	2007-2009	2008-2010	2009-2011	2010-2012	2011-2013	
Sonoma County	87.1%	87.9%	87.9%	86.8%	84.8%	83.4%	82.4%	81.6%	81.7%	82.3%	83.5%	84.3%	v
California	85.5%	86.4%	87.0%	87.0%	86.5%	85.1%	83.7%	82.7%	82.9%	82.1%	81.8%	83.6%	v
<i>Race/ethnicity</i>													
White non-Hispanic	91.2%	91.9%	92.2%	91.9%	91.1%	89.7%	88.4%	86.4%	86.6%	86.6%	87.3%	87.1%	v
Hispanic	81.0%	82.7%	82.5%	80.8%	78.0%	77.3%	77.2%	77.6%	77.2%	78.3%	80.1%	82.2%	
Asian/Pacific Islander	88.4%	89.1%	89.7%	88.1%	85.8%	84.2%	82.3%	80.7%	82.0%	81.2%	82.1%	80.7%	v
African American	84.6%	85.7%	83.6%	82.7%	79.9%	77.2%	74.5%	74.4%	71.8%	72.8%	70.9%	74.3%	v
American Indian	73.2%	71.7%	73.5%	70.3%	67.1%	62.5%	60.6%	61.5%	68.5%	73.2%	72.5%	68.7%	
2+ Race	88.1%	86.2%	85.4%	88.4%	86.6%	83.7%	82.5%	79.5%	81.1%	79.7%	82.1%	82.5%	v
<i>Mother's age</i>													
15-19 yr	75.9%	76.0%	75.2%	71.1%	66.5%	63.2%	62.2%	63.8%	64.6%	67.0%	66.4%	68.0%	v
20-29 yr	85.4%	86.5%	86.6%	85.3%	83.2%	81.6%	81.0%	79.7%	80.0%	80.6%	82.4%	83.1%	v
30-39 yr	91.0%	91.8%	91.7%	91.3%	89.9%	89.1%	87.9%	86.4%	86.1%	86.1%	87.0%	87.4%	v
40+ yr	91.4%	90.2%	89.2%	88.0%	88.0%	87.3%	86.8%	85.5%	84.7%	85.0%	83.7%	85.1%	v
<i>Pay source for delivery</i>													
Private Insurance	93.8%	94.7%	95.1%	95.0%	94.6%	93.2%	91.4%	89.0%	89.0%	88.6%	89.1%	89.4%	v
Medi-Cal	74.1%	75.7%	76.0%	74.2%	71.1%	70.7%	71.6%	72.6%	73.1%	74.8%	77.2%	78.6%	

v Significant decrease from 2000-2002 to 2011-2013 p<.05

^ Significant increase from 2000-2002 to 2011-2013 p<.05

Table 2. Births receiving first trimester prenatal care, three year average— Sonoma County 2011-2013

	Annual average	% total births	95% Confidence interval
Sonoma County	4289	84.3%	83.8-84.9
California	409642	83.6%	83.4-83.9
<i>Race/ethnicity</i>			
White non-Hispanic	2063	87.1%	86.3-87.9
Hispanic	1643	82.2%	81.2-83.2
Asian/Pacific Islander	186	80.7%	77.5-83.5
African American	45	74.3%	67.4-80.5
American Indian	31	68.7%	60.1-76.4
2+ Race	101	82.5%	78.2-86.3
<i>Mother's age</i>			
15-19 yr	175	68.0%	64.6-71.3
20-29 yr	1895	83.1%	82.1-83.9
30-39 yr	2032	87.4%	86.6-88.2
40+ yr	186	85.1%	82.1-87.7
<i>Pay source for delivery</i>			
Private Insurance	2512	89.4%	88.7-90.1
Medi-Cal	1704	78.6%	77.6-79.6

References

1. Maternal and Child Health Bureau, Health Resources and Services Administration, U.S. Department of Health and Human Services. Prenatal services. <http://www.mchb.hrsa.gov/programs/womeninfants/prenatal.html>
2. U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau. Child Health USA 2013. Rockville, Maryland: U.S. Department of Human Services, 2013.