

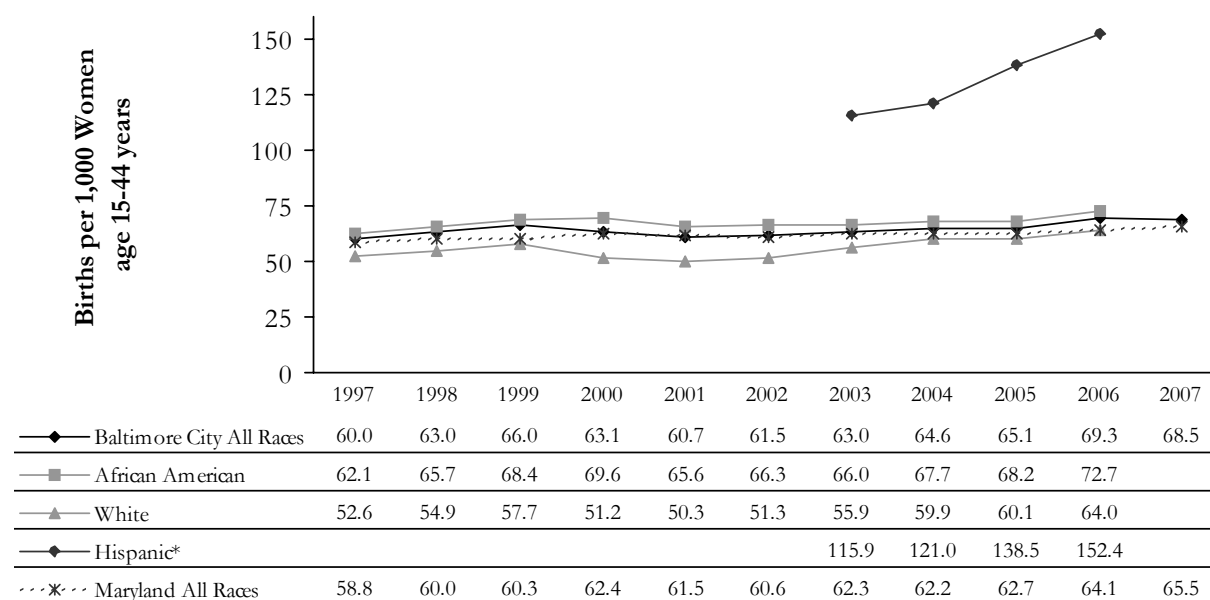
Maternal and Infant Health

Births

General Fertility Rate: The number of births per 1,000 women aged 15-44 years

National statistic: 68.5 births per 1,000 women aged 15-44 in 2006

General Fertility Rate, Baltimore City by Race and Maryland 1997-2007



Source: Maryland Department of Health and Mental Hygiene, Vital Statistics Annual Report (2007 data are preliminary and not yet available by race/ethnicity)

*Includes all births to mothers of Hispanic origin of any race, data not available prior to 2003

- In 2007, 9,875 babies were born to Baltimore City residents, resulting in a crude birth rate of 15.5 per 1,000 total population and a general fertility rate of 68.5 per 1,000 women aged 15-44 years.
- Since 1997, the general fertility rate has increased by 14% in Baltimore City and by 11% in Maryland.
- Over the past decade the general fertility rate increased by 17% among African American women and 22% among white women in Baltimore City
- Hispanic women in Baltimore City had the highest general fertility rate in all years for which there are data*. In 2006, the fertility rate among Hispanic women was two times as high as the rate for all Baltimore City women.

*Note: Population denominator estimates (especially for small population groups) become less certain with each year between two decennial censuses (the most recent census was in 2000 and the next will be in 2010). An underestimate of the Baltimore City Hispanic female population age 15-44 could lead to an overestimated fertility rate in this group. In 2006, the birth rate among Hispanic women nationwide was 101.5 per 1,000 women age 15-44 years which was almost 50% higher than the rate among U.S. women of all races and ethnicities (68.5 per 1000 women age 15-44 years).

Maternal and Infant Health

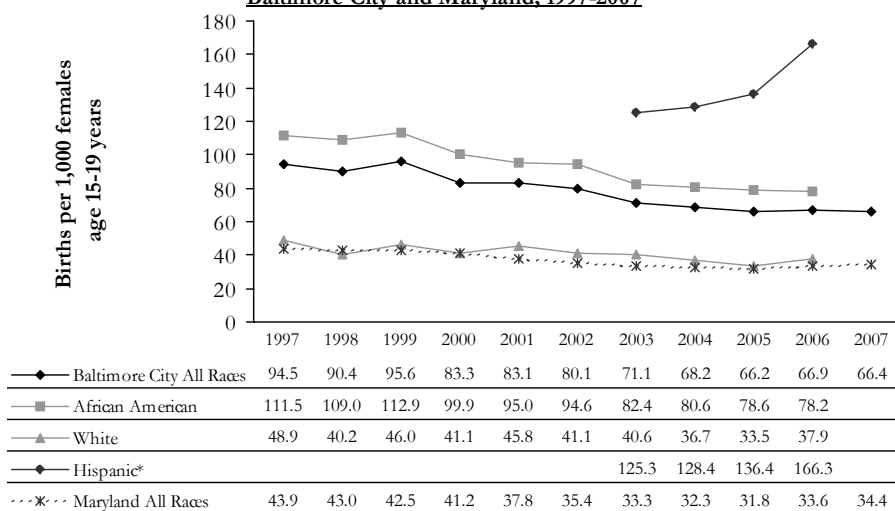
Teen Births

Teen Birth Rate: The number of births per 1,000 females age 15-19 years

Importance: Pregnant teenagers are less likely to receive proper prenatal care and therefore more likely to experience poor birth outcomes compared to older mothers.

National statistic: In 2006, rate of 41.9 live births per 1,000 women aged 15-19 years

Teen Birth Rate, Baltimore City by Race and Ethnicity, Baltimore City and Maryland, 1997-2007



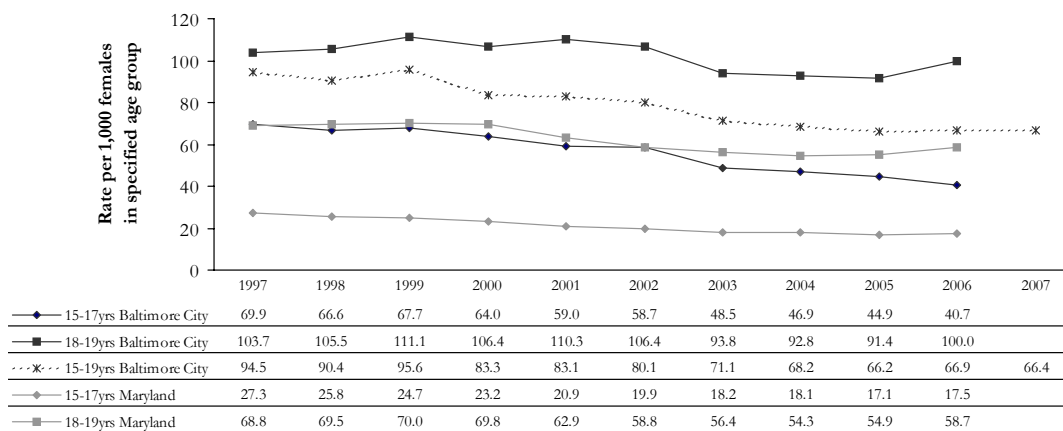
Source: Maryland Department of Health and Mental Hygiene, Vital Statistics Annual Report (2007 data are preliminary and not yet available by race/ethnicity). *Includes all births to mothers of Hispanic origin of any race, data not available prior to 2003 (Data for other races not available due to a small number of events).

- Since the early nineties, the teen birth rate has declined dramatically in Baltimore City (an overall ten-year decline of 30% and an average decline of about 4% per year since 1997). This decline has been driven by the substantial decline in births to African American teens (a 30% decrease over the past decade). Since 1997, teen births among white teens in Baltimore city decreased by 23%. From 2003 to 2006 births to Hispanic teens have increased by 33% (see note on previous page about Hispanic birth rates).
- Baltimore City's teen birth rate was two times greater than Maryland's rate and 1.6 times greater than the national rate in 2006.

- In 2006, the birth rate to Baltimore City teens increased for the first time since 1999.
- The increase occurred primarily among white and Hispanic teens (rates increased by 13% and 22% in these groups respectively) and among older Baltimore City teens (the rate among 18-19 year olds increased by almost 10% while it decreased by almost 10% among 15-17 year olds.)

- The US teen birth rate also increased in 2006, (for the first time since 1991), however that increase was larger than that seen in Baltimore: 3% nationwide vs. 1% in Baltimore (3% from 2005 to 2006).
- Preliminary data for 2007 suggest that the teen birth rate in Baltimore City has decreased slightly since 2006.

Teen Birth Rates by Age Group, Baltimore City and Maryland, 1997-2007



Source: Baltimore City Health Department analysis of data from the Maryland Department of Health and Mental Hygiene, Vital Statistics Annual Report (2007 data are preliminary and not yet available by race/ethnicity). Age-Specific Rates calculated using population denominators from CDC WONDER; United States Department of Health and Human Services (US DHHS), Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), Bridged-Race Population Estimates, United States July 1st resident population by state, county, age, sex, bridged-race, and Hispanic origin, compiled from 1990-1999 bridged-race intercensal population estimates and 2000-2006 (Vintage 2006) bridged-race postcensal population estimates, on CDC WONDER On-line Database, September 2007. Accessed at <http://wonder.cdc.gov/bridged-race+2006.html> on Jun 28, 2008.

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Prenatal Care

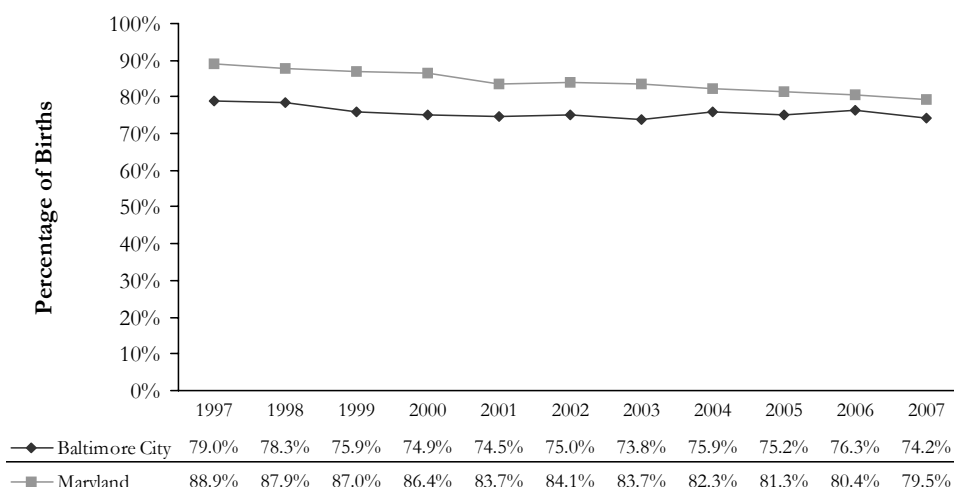
First Trimester Care: Initial visit within first three months of pregnancy

Importance: Early prenatal care promotes healthy pregnancy and birth outcomes (prevention of birth defects, preterm birth, etc.)

National statistic: In 2005, 83.9% of mothers received care **Healthy People 2010 goal:** 90%

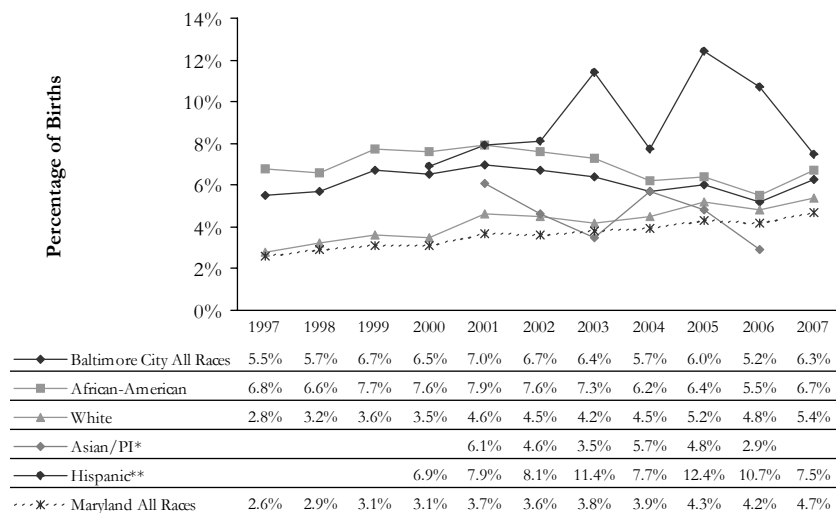
- In 2007, approximately three-quarters of Baltimore City mothers received prenatal care during the first trimester of pregnancy.
- From 1997 to 2007, the percentage of births to mothers who received first trimester prenatal care decreased by 2% in Baltimore City. State-wide, this percentage decreased by 9% .

Percentage of Births to Pregnant Women Receiving Prenatal Care During First Trimester, Baltimore City and Maryland 1997-2007



Source: Maryland Department of Health and Mental Hygiene, Maryland Annual Vital Statistics Report (2007 data are preliminary).

Percentage of Births to Pregnant Women Receiving Late or No Prenatal Care, Baltimore City by Race and Maryland 1997-2007



Late or no prenatal care - care beginning in 3rd trimester or no prenatal care.

Source: Maryland Department of Health and Mental Hygiene, Maryland Annual Vital Statistics Report (2007 data are preliminary).

*Data for Asian and Pacific Islanders not available prior to 2001 (not yet available for 2007).

**Includes all births to mothers of Hispanic origin of any race, data not available prior to 2000.

- In 2007, 6% of Baltimore City mothers received late or no prenatal care.
- Compared to 1997, the percentage of African American mothers who received late or no prenatal care has decreased by 2%. Among whites and Hispanics, this percentage has increased—by 93% and 9%, respectively (comparing 2000 to 2007 for Hispanics). Since 2001, the percentage of Asian/Pacific Islander mothers who received late or no prenatal care decreased by 53% (comparing 2001 to 2006).
- In Maryland, the percentage of births to women who had late or no prenatal care increased by 81% since 1997.

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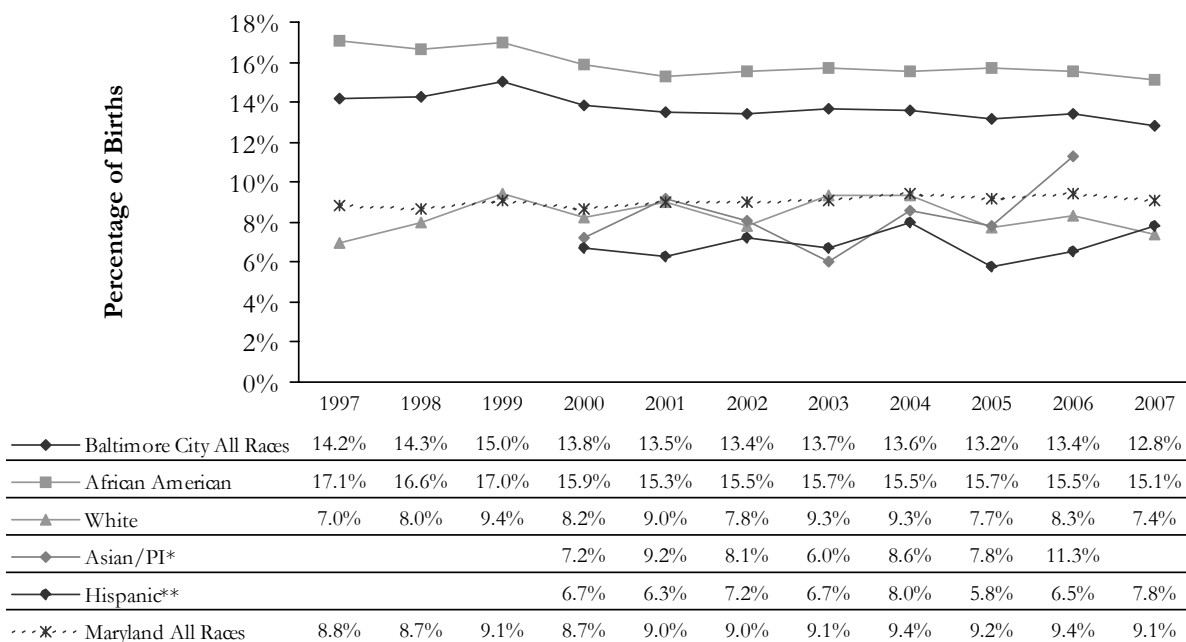
Low Birth Weight

Low Birth Weight: Babies weighing less than 2,500 grams (approximately 5.5 pounds) at birth

Importance: Birth weight is the most important factor affecting neonatal mortality and is a significant determinant of post-neonatal mortality; with a low birth weight, babies are at higher risk for developmental disabilities and respiratory problems.

National statistic: In 2005, 8.2% of babies of low birth weight **Healthy People 2010 goal:** 5.0%

Percentage of Low Birth Weight Births, Baltimore City by Race and Maryland 1997-2007



Source: Maryland Department of Health and Mental Hygiene, Maryland Annual Vital Statistics Report (2007 data are preliminary).

*Asian and Pacific Islander, data not available prior to 2000 (data not yet available for 2007).

**Includes all births to mothers of Hispanic origin of any race, data not available prior to 2000.

- Over the past decade, the percentage of low birth weight births has decreased by almost 10% in Baltimore City (from 14.2% in 1997 to 12.8% in 2007). In contrast, in Maryland the percentage of low birth weight births has increased by 3% during this time period (from 8.8% in 1997 to 9.1% in 2007). Despite these trends, Baltimore babies are 30% more likely to be low birth weight than Maryland babies.
- In 2007, African American mothers in Baltimore City were almost twice as likely to have a low birth weight baby compared to white mothers.
- On average, Hispanic mothers in Baltimore City were half as likely to have a baby of low birth weight from 2000 to 2007 compared to mothers of all races and ethnicities.

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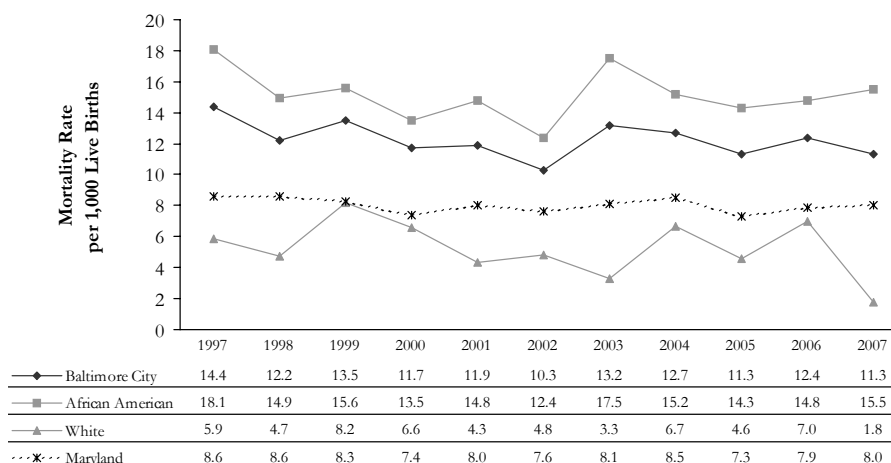
Infant Mortality

Infant Mortality: Death of infants less than one year of age (Infant Mortality Rate: the number of infant deaths per 1,000 live births)

Importance: Considered one of the most sensitive health indicators of a population

National statistic: 6.7 infant deaths per 1,000 live births in 2006 (preliminary data). **Healthy People 2010 goal:** 4.5 per 1,000 live births

Infant Mortality Rate, Baltimore City by Race and Maryland, 1997-2007



Source: Maryland Department of Health and Mental Hygiene, Maryland Annual Vital Statistics Report (2007 data are preliminary). Rates for other races and ethnicities are not available due to the small number of events in each subgroup.

Rank	Cause of Infant Death	Baltimore City			Maryland		
		Number	Rate*	Percent	Rank	Number	Rate* Percent
1	Disorders relating to short gestation and unspecified low birth weight	31	317.7	26%	1	123	158.9 20%
2	Sudden Infant Death Syndrome	20	205.0	17%	3	67	86.5 11%
3	Congenital Abnormalities	12	123.0	10%	2	110	142.1 18%
4	Newborn affected by maternal complications of pregnancy	10	102.5	8%	4	46	59.4 8%
5	Bacterial sepsis of newborn	5	51.2	4%	6	25	32.3 4%
6	Newborn affected by maternal complications of placenta, cord and membran	4	41.0	3%	5	34	43.9 6%
7	Newborn affected by other complications of labor and delivery	4	41.0	3%	not in MD top ten		
8	Respiratory distress of newborn	4	41.0	3%	7	23	29.7 4%
9	Neonatal hemorrhage	3	30.7	3%	8	15	19.4 2%
10	Pulmonary hemorrhage originating in the perinatal period	3	30.7	3%	not in MD top ten		
	All other causes (residual)	25	256.2	21%	n/a		
	All Causes	121	1240.1	100%		615	794.3 100%

Source: DHMH Vital Statistics Administration. *Rate per 100,000 live born infants. See technical notes for more information about the ICD-10 code groups for each leading cause of infant death. Causes in Maryland's top ten that were not in Baltimore City's top ten: Necrotizing enterocolitis of newborn (9th) and Diseases of the circulatory system (10th).

- In 2007, a total of 112 Baltimore City infants died, resulting in an infant mortality rate of 11.3 per 1,000 live births.
- In 2007, Baltimore City's infant mortality rate was 1.4 times greater than Maryland's rate resulting in 33 excess infant deaths.*
- The infant mortality rate among whites in Baltimore decreased by almost 75% from 2006 to 2007. Among African American infants, the mortality rate increased by 5% during this same time period. As a result, African American infants were almost nine times as likely to die in 2007 compared to white infants.
- Disorders related to low birth weight and short gestational age led to the largest number of deaths (26% of all deaths) among Baltimore City infants in 2006. Sudden Infant Death Syndrome was the second leading cause accounting for 17% of Baltimore City infant deaths. Baltimore City infants were two times as likely to die from disorders relating to low birth weight and short gestational age compared to Maryland infants and almost two and a half times as likely to die of Sudden Infant Death Syndrome.

*Excess Infant Deaths: The number of infant deaths in Baltimore City that is in excess of what would be expected if Baltimore City had the same infant mortality rate as Maryland.