# Alameda County Maternal, Infant, and Young Child Health Indicators- Updated February 2023

						Alameda County Rates by Race/Ethnicity						
						Black/						
		Healthy People			Alameda County	African		2	Pacific	Hispanic/		
		2030 Objective	Year	California	(count)	American <sup>1</sup>	Native Ameican <sup>2</sup>	Asian <sup>3</sup>	Islander <sup>4</sup>	Latino <sup>5</sup>	White <sup>6</sup>	Multirace <sup>7</sup>
	1 Total Population	NA	2020	39,538,223	1,648,969	161,435	4,063	518,758	12,518	366,331	510,318	70,952
Births	2 Number of Live Births	NA	2020	420,386	17,312	1,504	21	5,866	165	4,750	4,049	583
	3 Birth Rate (per 1,000 population)	NA	2020	10.6/1000	10.5/1000	9.3	•	11.3	13.2		7.9	
	4 Fertility Rate (per 1,000 females 15-44 yrs)	NA	2020	53.6/1000	49.9/1000	45.0		50.4	53.5		45.9	
	5 Teen Birth Rate (per 1,000 females ages 15-19 years)	31.4 or fewer	2018-2020	11.4/1000	6.4/1000 (326 per yr)	9.4		0.6	4.7*	14.9	2.0	
	6 Singleton Low Birth Weight Births (%)	7.8% or less <sup>i</sup>	2018-2020	7.0% <sup>ii</sup>	5.8% (1,007 per yr)	9.7	210	7.0	6.8	5.1	4.0	5.6
	7 Singleton Very Low Birth Weight Births (%)	1.4% or less <sup>i</sup>	2018-2020	1.1% <sup>ii</sup>	0.8% (138 per yr)	1.7	_	0.8	1.7*	0.8	0.5	
щ	8 Singleton Premature Births (%)	9.4% or less	2018-2020	8.8% <sup>ii</sup>	7.1% (1,241 per yr)	10.1	13.4*	6.7	10.1	7.7	5.8	6.7
	9 Singleton Very Premature Births (%)	1.5% or less <sup>i</sup>	2018-2020	2.3% <sup>ii</sup>	0.9% (165 per yr)	1.9	_	0.9	1.5*	1.0	0.6	1.1
	10 Medi-Cal Births (%)- Hospital Data	NA	2020	40.1% <sup>iii</sup>	26.8% (4,510)	50.0	23.3	11.0	23.4	51.0	8.7	21.2
	11 Births to First-Time Mothers (%)	NA	2020	39.5%	46.3% (7,993)	42.8	$30.0^{*}$	49.4	40.0	39.2	49.7	56.9
1	12 Births to non US-Born Mothers (%)	NA	2020	33.1%	48.3% (8,329)	19.7	_	77.5	33.1	50.4	24.5	9.3
s	13 Infant Death Rate (per 1,000 live births)	5.0 or fewer	2018-2020	4.2/1000	3.3/1000(59 per yr)	8.4		2.8	_	2.9	2.2	7.0
Deaths	14 Fetal Death Rate (per 1,000 births + Fetal Deaths)	5.7 or fewer	2018-2020	2.6/1000	4.5/1000 (80 per yr)	8.1	_	3.2	14.6*	4.4	3.8	3.5
Ď	15 SIDS/SUIDS Death Rate (per 1,000 live births)	0.8 or fewer <sup>i</sup>	2016-2020	0.5/1000	0.4/1000 (7 per yr)	1.3	_	_	_	0.4 <sup>i</sup>	_	
	16 First Trimester Entry into Prenatal Care (%)	80.5% or more	2020	87.9%	91.1% (15,382)	87.1	85.7	93.9	75.8		91.7	
×	17 Adequate/Adequate Plus Prenatal Care	80.5% or more	2020	73.6%	62.8% (10,868)	62.8		66.0	47.9		60.6	
ery	18 Gestational Diabetes	NA	2019-2020	101.0/10000 <sup>v</sup>	181.1/10000(3,117)	119.3	168.7	243.8	267.4	176.6	107.8	
Pregnancy d Delivery	19 Gestational Hypertension	NA	2019-2020	NA	122.7/10000(2,111)	209.1	180.7	84.6	158.6		130.5	
D	20 Severe Maternal Morbidity	61.8/10.000	2019-2021	104.2/10,000	146.2/10,000(867)	224.4		140.1 <sup>vii</sup>		151.5	122	
	21 Low Risk C-Section	23.6% or less	2019-2020	30.5% <sup>vii</sup>	25.5%(1,907 per yr)	28.1	_	27.3	22.6		25.7	
	22 Women Infants and Children (WIC) Recipients (%)	NA	2010 2020	36.8%	23.6% (4,409)	45.0		9.0	23.8		11.2	
~3	<ul> <li>Received CalFresh (food stamps during pregnancy)</li> </ul>	NA	2016-2018	22.5%	14.3%	44.3		7.0 <sup>#*</sup>		26.9	3.4*	
ion	24 Food Insecurity During Pregnancy	6.0% or less	2016-2018	15.0%	10.6%	25.0		$4.6^{\#*}$	_	20.9	6.6*	
We	25 Healthy Weight Before Pregnancy	47.1% or more	2018-2020	51.3%	46.1% (8,751 per yr)	37.2		65.6	19.2		57.3	
ź	26 Excessive Weight Gain During Pregnancy	NA	2018-2020	42.6%	40.0% (6,228 per yr)	51.8		30.4	61.3	44.5	43.4	
	27 Prenatal Depressive Symptoms	NA	2018-2020	14.6%	27.7%	31.6		16.7#		11.8	8.6	
2729	28 Postpartum Depressive Symptoms	NA	2018-2020	12.7%	23.4%	18.8		10.7 11.5 <sup>#</sup>	_		10	
Mei Hea & S	29 Often experienced racism over lifetime	NA	2016-2018	9.1%	12.7%	45.1		11.3 10.3 <sup>#</sup>	_	10.2	8.9*	
	30 Post Partum Birth Control Use (%)	65.1% or more	2016-2018	9.1% 80.2%	81.3%	43.1				90.4	83.4	
Family Planning	31 Unintended Pregnancies (%)	36.5% or less		39.7%	35.1%	59.1		71.1#		50.8		
inni	<ul> <li>31 Unintended Pregnancies (%)</li> <li>32 Unmet Need for Publicly Funded Contraceptive Services and Supplies (%)</li> </ul>	52.1% or less	2016-2018 2016	39.7%	25.0%	0.4		23.0#*		30.8	26.6 <sup>*</sup> 0.2	
Infants Fa			2018		23.0%	22.3					29.0	
	<ul> <li>33 Births Less Than 18 months Apart (%)</li> <li>34 Exclusively Breastfed Newborn in Hospital (%)</li> </ul>	26.9% or less NA	2017 2019	26.4% 70.0%	78.5%	72.2		21.1 79.7	65.1	18.4 73.6	29.0 85.9	
	35 Exclusive Breastfeeding Infant 3 months (%)	42.4% or more	2016-2018	33.5%	39.0%	37.8 70.0		32.7 <sup>#</sup>	_	28.1	57.4	
Infa	36 Any Breastfeeding Infant 3 months (%)	NA	2016-2018	70.6%	81.8%			87.1#	—	71.5	87.0*	
	37 Placed Infant on Back to Sleep (%)	88.9% or more	2016-2018	83.2%	86.5%	73.1		89.4#	—	80.9	91.8 <sup>*</sup>	
	38 Infant Always/Often Shared Bed (%)	NA	2016-2018	34.8%	36.3%	54.5		37.5#		42.4	22.1	
	39 Women ages 15-44 years Living in Poverty (%)	8.0% or less	2019	13.6%	10.1%	23.3		6.8	12.6 <sup>vii</sup>		9.4	
gun	40 Women 18-44 with Less Than a High School Education (%)	9.3% or less	2019	10.5%	6.9%	7.8		4.0	6.6 <sup>vii</sup>		3.1	
Yoı	41 Uninsured Women 15-44 years (%)	8.6% or less	2019	9.7%	5.1%	5.6		2.7	6.7		2.4	
Won	42 Women on Public Insurance 15-44 years	NA	2019	26.6%	18.7%	41.2	37.2	10.4	21.2	26.4	12.5	20.:
	43 Women Ages 18-44 Years who had a routine checkup within the past	NA	2016-2020	70.9%	65.5%	70.1*	_	62.2	_	69	63.6	71.6
	year (%)	NIA		15 50/	9.7%	40.7	22.1	1.8	0 (1)	12.7	3.8	
	44 Children Under 6 Years Living in Poverty (%) 45 Children Under 6 Years en Public January (%)	NA	2019	15.5%					9.6 <sup>vii</sup>			
	45 Children Under 6 Years on Public Insurance (%)	NA	2019	44.6%	28.2%	67.6	31.3	11.7	30	45.1	12.7	30.

Alameda County Public Health Department, Maternal, Paternal, Child, and Adolescent Health.

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See page 2. for race/ethnicity descriptions, MPCAH indicator definitions, and data sources.

### Interpretation

Count: A count or frequency is the actual number of events or cases at a given point in time. Counts are used to look at the magnitude of the health event within a population.

Rate: A rate is a measure of a health event in a specific population over a set time period. For example, the Alameda County (AC) birth rate is the number of live births over the total AC population per 1,000 residents or 12.5 per 1,000 residents. Rates are used to compare populations of different sizes or over different time periods, for example comparing different races/ethnicities or ages.

Percentage: A percentage or prevalence is a proportion of total events over the total population that can be affected at a given point in time. Percentages are used to compare populations of different sizes for example comparing different races/ethnicities.

Statistics highlighted in green are those race/ethnic groups that have the highest percentage or highest rate of births for a demographic indicator.

Statistics highlighted in red are those race/ethnic groups that have the most inequitable outcomes.

Alameda County is missing race/ethnicity data for 2.2% of all births in 2020.

All Poverty, Insurance and Education Data for American Indians, Pacific Islanders, and Multirace is from 5 year files 2013-2017.

## **Technical Notes**

- Rates not displayed because of low incidence, not available, or not applicable (Counts below 5 are excluded).

- \* Rate should be interpreted with caution because it is less stable due to small numbers (e.g. 5-9 occurrences).
- # Category includes Asians, Native Hawaiians and other Pacific Islanders (API).
- i Healthy People 2020 Objective.

ii California rate is overestimated because it includes singleton and multiple births.

- iii. California rate is underestimated because it is from birth certificate rather than hospital discharge data.
- iv. California rate includes 2017-2019 combined years.
- v. California 2018 data.

vi.California rate is overestimated because it includes all cesarian births not just low risk c-section births.

vii. Native American, Pacific Islander, and Multirace five-year rates were used for stability, 2015-2019 combined years.

\* MIHA estimate should be interpreted with caution due to low statistical reliability (RSE between 30% and 50%).

Race/Ethnicity Descriptions for Birth and Death data. Note: refer to other data sources for their race/ethnicity definitions.

1 African Americans are babies born to Black non-Hispanic mothers.

2 American Indians are babies born to American Indian, Eskimo, or Aleut non-Hispanic mothers.

3 Asians are babies born to Asian non-Hispanic Mothers.

4 Pacific Islanders are babies born to Hawaiian, Guamian, Samoan, or other Pacific Islander non-Hispanic mothers.

5 Latinos are babies born to Hispanic/Latino mothers of any race with Mexican, Chicano, Puerto Rican, Cuban, Central/South American, or other Spanish/Hispanic ethnicity.

6 White are babies born to White non-Hispanic mothers.

7 Multirace are babies born to non-Hispanic mothers of more than one race.

#### Definitions

Birth Rate (BR): Number of total births per 1,000 population.

Fertility Rate: Number of births to mothers 14-55 years per 1,000 population females 15-44 years of age.

Teen Birth Rate (TBR): Number of births to 15-19 year old mothers per 1,000 population females 15-19 years of age.

Singleton Low Birth Weight Births: Number births <2,500g/number live births. Singleton births are included because multiple births (twins, triplets) are often premature and low birth weight.

Singleton Very Low Birth Weight Births: Number births <1,500g/number live births. Singleton births are included because multiple births (twins, triplets) are often premature and low birth weight.

Singleton Preterm Births: Number births <37 weeks gestation/ number live births. Singleton births are included because multiple births (twins, triplets) are often premature and low birth weight.

Singleton Very Preterm Births: Number births <32 weeks gestation/ number live births. Singleton births are included because multiple births (twins, triplets) are often premature and low birth weight

Medi-Cal Births: Births to women where Medi-Cal was indicated as payer source for delivery.

Births to First-Time Mothers: Births to women with no previous children.

Births to non US born Mothers: Births to women not born in the US. Birth Certificate data does not include the number of years the mother has been living in the United States.

Infant Death Rate (IMR): Number of deaths of children <1 year of age per 1,000 live births.

Fetal Death Rate: Number of deaths after 22 weeks gestation and prior to birth not due to abortions per 1,000 live births + fetal deaths.

SIDS/SUIDS Death Rate: Number of deaths from Sudden Unexplained or Infant Death Syndrome per 1,000 births (ICD-10 Mortality Codes: W75, R95, R99)

First Trimester Entry into Prenatal Care: Pregnant women who began prenatal care within the first three months of their pregnancy.

Adequate/Adequate Plus Prenatal Care: APNCU uses two crucial elements obtained from birth certificate data-when prenatal care began (initiation) and the number of prenatal visits from when prenatal care began until delivery (received services). Adequate/Adequate Plus Prenatal Care (APNC) is a ratio of observed to expected visits and is considered adequate when it is equal to or greater than 80%. The Kotelchuck Index does not measure the quality of prenatal care. It also depends on the accuracy of the patient or health care provider's recall of the timing of the first visit and the number of subsequent visits. Gestational Diabetes: Diabetes diagnoses during pregnancy per 1,000 live birth deliveries.

Gestational Hypertension: Hypertension diagnoses (preeclampsia and eclampsia) during pregnancy per 1,000 live birth deliveries.

Severe Maternal Morbidity (SMM): Number of unexpected and potentially life-threatening complications from labor and delivery that result in significant short- or long-term health consequences. SMM includes 20 indicators that represent either serious complications of pregnancy or delivery, such as sepsis or acute Low Risk C-section: Percentage Primary C-section during full-term (not premature) singleton delivery.

Women Infants and Children (WIC) Recipients: Percentage births where the mother participated in the Women Infants and Children (WIC) program

Received CalFresh: Percentage of MIHA survey respondents who received Food stamps or California Supplemental Nutrition Assistance Program (SNAP) during pregnancy.

Healthy Weight Before Pregnancy: Percentage with BMI >24.4 prior to becoming pregnant. Prepregnancy weight is based on Body Mass Index (BMI) was calculated from self-reported weight and height. BMI may overestimate or underestimate body fatness in some individuals since it does not take into consideration an individual's muscle or bone mass

Excessive Weight Gain During Pregnancy: Percentage of mothers who gained weight above recommended amount during their pregnancy, Weight gain during pregnancy is the difference between an individual's weight. Excessive weight gain during pregnancy is based on the National Academy of Medicine, previously the Institute of Medicine (IOM), guidelines for recommended weight gain during pregnancy (limited to full-term, singleton births) that are specific to an individual's prepregnancy Body Mass Index (BMI).

Prenatal Depressive Symptoms: Percentage of MIHA survey respondents who always or often felt down, depressed hopeless or had little interest or pleasure in doing things usually enjoyed during their pregnancy.

Postpartum Depressive Symptoms: Percentage of MIHA survey respondents who always or often felt down, depressed hopeless or had little interest or pleasure in doing things usually enjoyed during in the postpartum period.

Often Experienced Racism Over Lifetime: Percentage of MIHA survey respondents who reported often/always to the following statement, overall during your life until now, have you been discriminated again, prevented from doing something, or hassled or made inferior because of your face, ethnicity or color. Post Partum Birth Control Use: Percentage of MIHA survey respondents who indicated that the woman or husband/partner was doing something at the time of the survey to keep from getting pregnant.

Unintended Pregnancies: Percentage of MIHA survey respondents who indicated that their pregnancy is a pregnancy that was either mistimed or unwanted. Mistimed pregnancy occurs when a woman did not want to become pregnant at the time the pregnancy occurred, but does want to become pregnant at some point in the future. Unwanted pregnancy occurs when woman did not want to become pregnant then or at any time in the future.

Unmet Need for Publicly Funded Contraceptive Services and Supplies: Number of females 13-44 years of age who likely need public support for contraceptive services and supplies/ female population 15-44 years of age.

Births Less Than 18 months Apart: Percentage of mothers giving birth to a child less than 18 months after giving birth to previous child.

Exclusively Breastfed Newborn in Hospital: Pregnant women who exclusively breastfed newborn in hospital after birth.

Exclusive Breastfeeding Infant 3 months: Percentage of MIHA survey respondents who reported they fed their infant only breast milk (no supplementation with formula, other liquids or food) for at least three months after delivery.

Any Breastfeeding Infant 3 months: Percentage of MIHA survey respondents who reported they fed their infant breast milk for at least three months after delivery with or without supplementing with formula.

Placed Infant on Back to Sleep: Percentage of MIHA survey respondents who reported they put their baby down to sleep on his or her back most of the time.

Infant Always/Often Shared Bed: Percentage of MIHA survey respondents who reported their infant always or often slept in the same bed with mother or someone else.

Women ages 15-44 years living in poverty: Percentage of females between 15 and 44 years of age living at or below 100% poverty level for whom poverty status can be determined.

Women Ages 18-44 Years with Less Than a High School Education: Percentage of females 18 to 44 years of age whose highest level of education was less than high school diploma or GED for whom educational attainment could be determined.

Uninsured Women Ages 15-44 years: Percentage of females 15-44 years of age who had no health insurance coverage in the previous 12 months for whom health insurance status could be determined.

Women on Public Insurance 15-44 years: Percentage of females ages 15-44 years who have insurance through Medicare, Medicaid, and/or the Department of Veterans Affairs insurance.

Women Ages 18-44 Years who had routine checkup within the past year: Percentage females 18-44 years of age who had a routine check-up in the past 12 months.

Children under 6 years living in poverty: Percentage of children under 6 years of age living at or below 100% poverty level for whom poverty status can be determined.

Children under 6 years on Public Insurance: Percentage of children under 6 years who have insurance through Medicare, Medicaid, and/or the Department of Veterans Affairs insurance.

### Data Sources

CAPE with data from Census 2010 and Esri (1)(2)(3)(4)(5)(32) Alameda County Vital Statistics files Birth, Fetal Death, and Death files (2)(3)(4)(5)(6)(7)(8)(9)(11)(12)(13)(14)(15)(16)(17)(21)(22)(25)(26) California Department of Health Care Access and Information (HCAI) Patient Discharge Data files using medical diagnoses and procedure billing codes (10)(18)(19)(20) Maternal and Infant Health Assessment (MIHA). Individual data request (23)(24)(27)(28)(29)(30)(31)(35)(36)(37)(38) Guttmacher Institute Data Center. Alameda County Fat Sheet, September 2016 (32) Family Health Outcomes Project (FHOP) Alameda County Databook 2017 (33) California Department of Public Health. In-Hospital Breastfeeding Survey, 2019 (34) U.S. Census Bureau, American Community Survey 1 year file 2019 and 5 year files 2015-2019 (39)(41)(44) Integrated Public Use Microdata Series (IPUMS-USA) Integrated files, 1 year and 5 year files 2019, 2015-2019 (40)(42)(45) California Health Interview Survey 2016--2020 (43) Healthy People 2030 Objectives were obtained from the Healthy People 2020 website