

INTRODUCTION

The health of children is reflective of the overall health of a nation, and has many implications for the nation's future as these children grow into adults. Children's long-term health and development can be highly influenced by early life events, beginning even before birth with the health of their mother. Effective policies and programs are important for ensuring the health of women before, during and after pregnancy to optimize both maternal and infant outcomes. Additionally, minimizing adverse birth and infant outcomes is critical to mitigating risk factors for disease later in life. However, the health and health care needs of mothers and infants change over time, and current data on these issues is critically important as policy makers and program planners seek to improve the health of children, now and into the future.

Research suggests that efforts to improve pregnancy outcomes and the health of mothers and infants may be most effective if they begin before a woman is pregnant. It is important to establish healthy behaviors and achieve optimal health before pregnancy, as many women are not aware of their pregnancy until several weeks or more after conception. In 2009–2010, about one in four recent mothers in a 30-state area reported binge drinking (consuming 4 or more drinks in a sitting) at least once within 3 months prior to pregnancy and 24.2 percent re-

ported smoking during the same time period. Both smoking and alcohol use during pregnancy have been associated with adverse birth outcomes, including preterm birth and low birth weight.

In 2011, 11.73 percent of infants were born preterm and 8.10 were born at low birth weight. Preterm birth and low birth weight have been associated with a range of short- and long-term consequences for children's health and development. The prevalence of both preterm and low birth weight births varies by race and ethnicity, with infants born to non-Hispanic Black mothers most likely to experience either of these outcomes. Although both preterm and low birth weight increased through the middle of the last decade, the prevalence of both indicators has declined since.

Diabetes and hypertension are the most commonly reported health conditions among pregnant women and pose health risks to both a woman and her baby. In 2010, chronic or pre-existing diabetes was reported in 7.0 per 1,000 live births, while gestational diabetes was reported in 44.2 per 1,000 live births and chronic and pregnancy-associated hypertension were reported in 12.7 and 43.4 per 1,000 live births, respectively. Maternal morbidity—or illness—is significantly more common than maternal mortality. Nonetheless, in 2006–2008, the latest years for which data are available, a

total of 1,953 maternal deaths were found to be pregnancy-related, for a rate of 15.2 deaths per 100,000 live births. These include deaths which occurred during or within one year after the end of a pregnancy, from any cause related to or aggravated by the pregnancy or its management, but not from accidental or incidental causes such as injury. Pregnancy-related mortality is more common among non-Hispanic Black mothers and older mothers.

A number of perinatal risk factors and behaviors can affect both the health of the mother



and the infant. Gaining too much or too little weight during pregnancy can result in immediate and long-term health risks to a woman and her infant. Among recent mothers in 2009–2010, only about 1 in 3 or 31.5 percent gained the recommended amount of weight and nearly half (47.1 percent) gained an excessive amount of weight during pregnancy. About one in five women (21.4 percent) gained an inadequate amount of weight in pregnancy. Excessive weight gain may increase the risk of pregnancy complications, cesarean delivery, larger infant birth weight, and postpartum weight retention.

Experiencing stressful events or environmental hardships, such as financial instability, the death of a loved one, or divorce, while pregnant can place an additional strain on a woman and increase her likelihood of adverse birth outcomes, including preterm birth and low birth weight. In 2009–2010, nearly three-fourths of recent mothers in a 30-state reporting area reported that they had experienced at least one stressful event in the 12 months prior to delivery of their child. Intimate partner violence, including physical, sexual, and psychological abuse, before and during pregnancy has also been associated with adverse maternal and infant outcomes. In 2009–2010, approximately

4 percent of recent mothers reported that they had been pushed, hit, slapped, kicked, choked, or physically hurt in some other way by an intimate partner in the 12 months prior to becoming pregnant and 3.2 percent reported experiencing this type of abuse during their most



recent pregnancy.

Health behaviors after a baby is born are also important to ensuring optimal health and development. Safe sleep behaviors are practices that reduce the risk of Sudden Infant Death Syndrome (SIDS) and sleep-related suffocation. In 2009, SIDS and other sleep-related infant deaths accounted for 15.1 percent of all infant

deaths. To reduce the risk of SIDS, it is recommended that infants be placed on their backs for every sleep until 1 year of age. In 2009–2010, 70.5 percent of recent mothers in a 30-state area reported that their infant was laid down to sleep on his or her back most of the time.

The health care utilization rates, programs, and policies described in *Child Health USA* can help policymakers and public health officials better understand current trends in pediatric health and wellness and determine what programs might be needed to further improve the public's health. These indicators can also help identify positive health outcomes which may allow public health professionals to draw upon the experiences of programs that have achieved success. The health of our mothers and infants relies on effective public health efforts that include ensuring access to early and adequate prenatal care and related counseling as well as post-partum and well-baby care, providing vaccinations against preventable diseases, and supporting the dissemination and implementation of evidence-based programs to promote optimal maternal and infant health outcomes. Such preventive efforts and health promotion activities are vital to the continued improvement of the health and well-being of America's children and families.