

Early Prenatal Care

Latina and African American women have the lowest rates of prenatal care in the first trimester.

Between 2002 and 2004, 88.5% (35,234) of pregnant women residing in Contra Costa began prenatal care during their first trimester of pregnancy. On average, each year approximately 11,745 women residing in Contra Costa begin prenatal care during their first trimester (early prenatal care).

Prenatal care initiated during the first three months of pregnancy – the first trimester – is considered “early prenatal care” or “early entry into prenatal care”.

Thus, 11.5% of pregnant women in Contra Costa do not receive early prenatal care. This means that these women do not receive prenatal care at all during their pregnancy, start prenatal care after the first trimester, or their care status is unknown. This county percentage (11.5%) is lower than that of California (13.0%).

- Contra Costa’s percentage of women who begin prenatal care during the first trimester (88.5%) does not meet the Healthy People 2010 objective (90.0%).
- 11.5% of Contra Costa women residents do not receive prenatal care in the first trimester.
- Women residents of Bay Point/Pittsburg and Concord have lower rates of prenatal care in the first trimester.

Local Findings

Women in Early Prenatal Care by Race/Ethnicity

Table 1. Contra Costa, 2002–2004

	Cases	Percent	Rate
White	14,758	41.9%	*93.4
Latina	10,200	28.9%	**81.8
Asian/Pacific Islander	4,734	13.4%	91.1
African American	2,925	8.3%	**83.6
Contra Costa ^a	35,234	100.0%	88.5

* Significantly higher rate than the county

** Significantly lower rate than the county

The highest number of pregnant women in the county who obtain early prenatal care are White (14,758), followed by Latina (10,200), Asian/Pacific Islander (4,734), and African American (2,925).

African American (83.6 per 100 live births) and Latina women (81.8 per 100 live births) have lower rates of early

prenatal care compared to White women (93.4 per 100 live births) and women in the county overall (88.5 per 100 live births). White women have the highest rate of early prenatal care – higher than county women overall and women of any other race/ethnic group.

Women in Early Prenatal Care by City

Table 2. Contra Costa County 2002–2004

	Cases	Percent	Rate
Richmond	4,419	12.5%	88.2
Concord	4,405	12.5%	**83.3
Antioch	3,990	11.3%	85.5
Bay Point & Pittsburg	3,510	10.0%	**78.6
Walnut Creek	2,123	6.0%	*94.4
San Pablo	2,071	5.9%	88.1
Brentwood	1,701	4.8%	90.0
Martinez	1,330	3.8%	90.5
Oakley	1,083	3.1%	86.7
Pinole	529	1.5%	91.4
Contra Costa	35,234	100.0%	88.5

* Significantly higher rate than the county.

** Significantly lower rate than the county.

The rate of prenatal care varies by community. Bay Point/Pittsburg (78.6 per 100 live births) and Concord women (83.8 per 100 live births) have lower rates of early prenatal care than women in the county overall (88.5 per 100 live births). Walnut Creek women have a higher rate (94.4 per 100 live births) of early prenatal care than county women overall.

Prenatal care is critical to the development of a healthy baby. Early and comprehensive prenatal care improves the chances of a positive outcome for both mother and child by identifying conditions that might complicate the pregnancy and providing important information about nutrition, exercise and preparation for childbirth.



Data Sources: Early Prenatal Care

Tables

Tables 1, 2: Birth data from the California Department of Health Services (CDHS), Birth Statistical Master Files, 2002-2004. Any analyses, interpretations or conclusions of the data have been reached by CHAPE and are not from the CDHS. Data for the following race/ethnicity groups was excluded due to small numbers: American Indian/Alaska Native, Native Hawaiians, Two or More Races, and Other. Data was not available for all Contra Costa cities. These tables include total number of women residing in Contra Costa who initiated prenatal care in the first trimester and average crude early prenatal rates for 2002 through 2004.

Early prenatal care rate = number of mothers who began prenatal care during the first trimester of pregnancy divided by the number of live births multiplied by 100.

Population data from:

California Department of Finance (April 2006). *Estimated Race/Ethnic Population with Age and Sex Detail 2000-2004*. Sacramento, CA.

California Department of Finance (May 2006). E-4 Population Estimates for Cities, Counties and the State 2001-2006, with DRU Benchmark. Sacramento, CA. Available online at: <http://www.dof.ca.gov/HTML/DEMOGRAP/Druhpar.htm>

Note: City level denominators were extrapolated from the E-4 file to approximate the mid-year city-level population estimates that are needed to calculate city-level rates. For more information, see our section on statistical methods.