



Maternal Health Committee Turn The Curve Report August 2016

Result: Women will have healthy pregnancies with positive birth outcomes.

Indicators:

- Decreased rates of not medically necessary C-sections
- Increased rates of V-BAC (Vaginal Birth After C-section)
- Decreased rates of prematurity
- Decreased rates of health related preconception, prenatal, and inter-conception conditions (obesity, hypertension, diabetes)
- Increased rates of early access to prenatal care
- Decreased rates of fetal and infant mortality

What do we know and the story behind the data:

- Total number of live births: 21,541 in 2013, 12.1% of all births in the State of Florida. 54th of 67 Counties. While rate is still higher than the State, it has been steadily *decreasing* since 1994. The rate has been *decreasing* among Broward Black and Others, and slightly *increasing* among Broward Whites.
- The rate of live births has been *decreasing* for Hispanics, with a *slight uptick* between 2012 and 2013.
- The rate of births to **uninsured** women is *on the rise* for both White, Black/Other and Hispanic women and is greater than the rate of the State, which is decreasing.
- Broward County's rates for births covered by Medicaid is increasing both for Black and White births, although the rate is less than the State. The rate for Broward Hispanic births covered by Medicaid is on the decline.
- Broward County experiences higher rates of births to mothers with 3rd trimester or no prenatal care, including among White, Black/Other, and Hispanic mothers.
- In terms of **obesity**, Black/Other women experience *higher rates* of obesity at the time pregnancy occurred, and the numbers are increasing. The rates of women who are overweight at the time of pregnancy are *increasing* for both White and Black/Other women in Broward County. Broward County ranked in the 3rd quartile (1=most favorable, 4=least favorable) for mothers who had live births who were at a healthy weight (BMI 18.5 24.9) at the time pregnancy occurred (41.27%). Broward County has a higher percent of overweight adults (38.44%) than the State of Florida (36.72%) for the period 2011-2012.
- Broward County has been experiencing a higher rate of C-section deliveries, with White, Black/Other, and in particular Hispanic women delivering by C-section at a greater rate than the state. For the year 2013, the greatest rate of Cesarean Section deliveries were at Holy Cross Hospital (51.7%), Memorial Hospital Miramar (46.23%), and Plantation General Hospital (44.20%).
- While the preterm birth rate for Broward women is less than for the state, Broward has a *higher rate* of **preterm births under 2500 grams** and **1500 grams**, with racial disparity



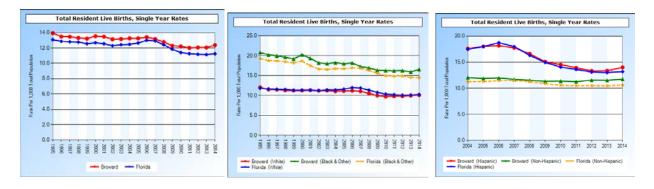


between White and Black/Other babies. Broward County has a *higher percent* of **low birth weight births**-under 2500 grams (9.3%) compared to Florida (8.7%) for the period 2006-2010.

- Broward County has a higher rate of chlamydia infection than the state of Florida (414.7 per 100,000 compared to 407.42).
- Broward County has a higher prevalence rate of HIV/AIDS compared to Florida and the United States (1,078.8 per 100,000 people compared to 592.69-Florida and 340.37-United States).

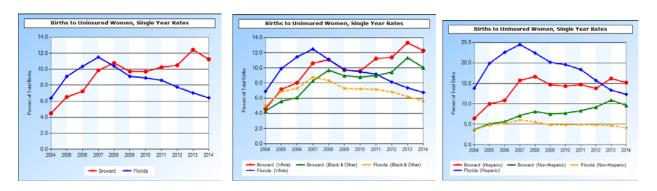
Rate of Live Births

While the rate of live births to White mothers in Broward has remained the same as the State, the rate of live births to Black mothers has remained consistently greater than the State. During the same time period, the rate of live births to Hispanic mothers has also been greater than the rate of live births to non-Hispanic mothers. While the rate of White and Black live births has remained stable since 2010, the rate of live births had been decreasing for Broward Hispanics, and has been increasing since 2012.



Rate of Births to Uninsured Women

The rate of births to uninsured women has been on the rise for White, Black/Other and Hispanic women and is greater than the rate of the State, which is decreasing, however there have been decreases in the rates of births to uninsured women across all Broward women between 2013 and 2014.

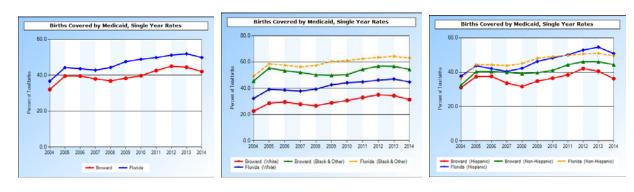




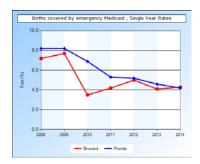


Rate of Births covered by Medicaid and Emergency Medicaid

Broward County has had lower rates of births covered by Medicaid than the state of Florida between 2004 and 2014, though the rate for both the state and Broward has decreased slightly between 2013 and 2014. In terms of racial differences, the pattern holds true for babies born to Black mothers during the same time period. Note, however, the racial disparity between births covered by Medicaid to White and Black/Other mothers. The disparity rate has remained consistent, with births to Black and Other mothers covered by Medicaid at two times the rate of births to White mothers. The disparity rate between births to Broward Hispanic mothers and non-Hispanic mothers has fluctuated, with most recent rates showing a higher rate of births covered by Medicaid to Hispanic mothers compared to non-Hispanic mothers.



In 2008, emergency Medicaid became available to non-citizens to cover the costs of emergency labor and delivery. While Broward births covered by emergency Medicaid decreased between 2008 and 2010, they have increased and remained consistent and similar to the state of Florida through 2014. These rates are not available specific to race or ethnicity.

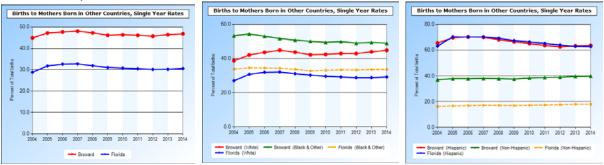






Country of Origin

Of note is that almost 50% of total births in Broward County have been to mothers born in other countries, compared to 30% of Florida births. The rate for births to Black and White mothers born in other countries has been less than 50% in Broward County, while the rate for births to Hispanic mothers born in other countries has been over 60%.



Access to prenatal care

An important indicator that relates to the health of the mother and the baby is her early access to prenatal care. The following charts show the rates of prenatal care between 1995 and 2014 in Broward County. Between 2008 and 2011, over 15% of all births were classified as "unknown prenatal care." Between 2012 and 2014, that percent has decreased to under 10%, however still higher than the state of Florida.

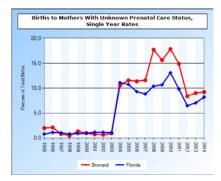
Almost 80% of all births with known prenatal care status in Broward County were births to mothers with 1st semester prenatal care. This figure has remained consistent since 1995. An additional 15% of all births with known prenatal care status were births to mothers with 2nd semester prenatal care consistently since 2006, with an increase recognized between 2013 and 2014. Between 3 and 4% of all births with known prenatal care status were births to mothers with 3rd semester prenatal care from the period 2008-2013, however this number has also increased between 2013 and 2014. Finally, the percentage of births with known prenatal care status to mothers with no prenatal care decreased between 2008 and 2010 and has increased since, from 1.5% of all births to over 2% of all births.

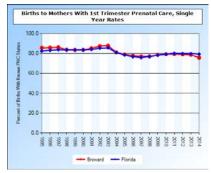
These numbers indicate that while the majority of women are receiving prenatal care during their first trimester, almost 20% are not receiving prenatal care until their 2nd trimester and beyond, if at all. This has serious implications for a number of complications associated with birth outcomes.

In addition, Broward White women are more likely than Broward Hispanic women to have no prenatal care, while Broward Black women are more likely than Broward White women to have no prenatal care. The rate of women with 3rd trimester or no prenatal care is increasing for Black, White and Hispanic women.

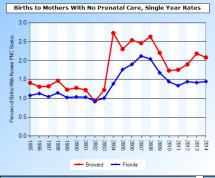




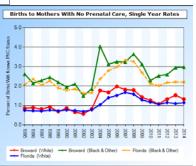


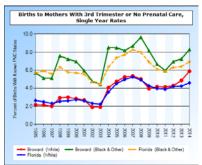


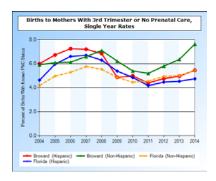














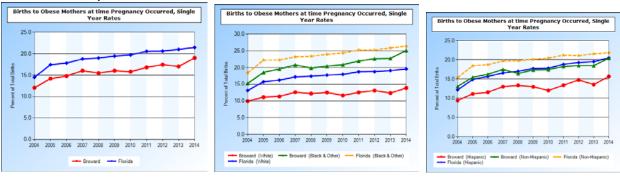


Health of the mother

There are several characteristics that affect the health of the mother. All of these factors may affect the quality of the pregnancy as well as the quality of the birth outcome.

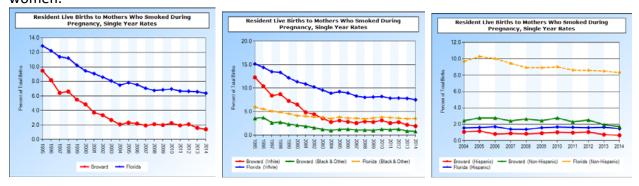
Obesity

While Broward County women were less likely to be obese at the time the pregnancy occurred than women in the state of Florida, there are racial disparities in this area. Black women were more likely to be obese than White women and non-Hispanic women were more likely to be obese than Hispanic women.



Smoking Status

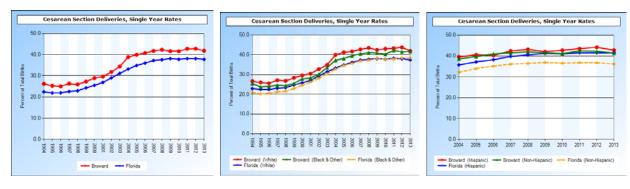
This rate has been on the decline over the past several years, both in Broward County and in the state of Florida. White women are more likely to smoke during pregnancy than Black women and non-Hispanic women are more likely to smoke during pregnancy than Hispanic women.



Broward County has been experiencing a higher rate of C-section deliveries, with White, Black/Other, and in particular Hispanic women delivering by C-section at a greater rate than the state. For the year 2013, the greatest rate of Cesarean Section deliveries were at Holy Cross Hospital (51.7%), Memorial Hospital Miramar (46.23%), and Plantation General Hospital (44.20%).

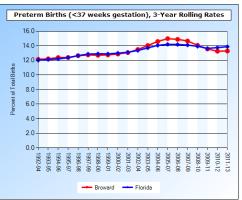


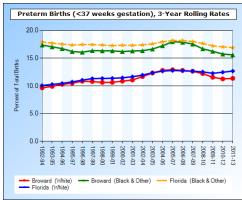


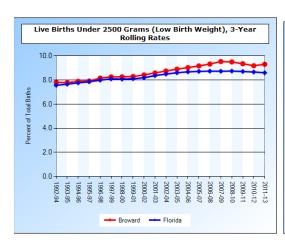


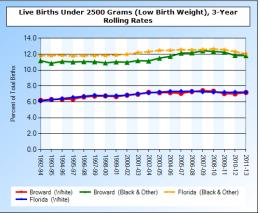
Premature Births-Broward County

While the preterm birth rate for Broward women is less than for the state, Broward has a higher rate of preterm births under 2500 grams and 1500 grams, with racial disparity between White and Black/Other babies.



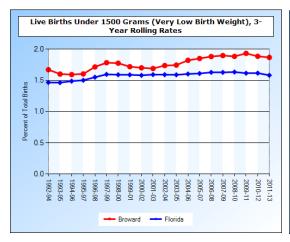












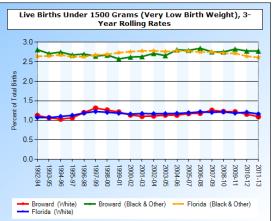


CHART D-16: RESIDENT MATERNAL DEATHS AND RATIOS PER 100,000 LIVE BIRTHS, BY, RACE, FLORIDA, CENSUS YEARS 1970-2000 AND 2003-2013

		NUMBER O	F DEATHS	RATIOS 2			
YEAR	TOTAL	WHITE	BLACK	OTHER	TOTAL	WHITE	BLACK
1970	35	21	14	0	30.4	24.2	50.8
1980	16	9	6	1	12.1	9.2	18.1
1990	22	9	13	0	11.0	6.0	28.0
2000	26	15	11	0	12.7	10.0	23.3
2003	23	7	15	1	10.8	4.4	31.8
2004	35	14	20	1	16.1	8.7	42.6
2005	52	33	14	5	23.0	19.9	29.2
2006	35	14	18	2	14.8	8.0	35.4
2007	48	28	17	3	20.1	16.0	33.0
2008	32	13	17	2	13.8	7.8	33.1
2009	58	38	20	0	26.2	23.9	39.6
2010	44	23	19	2	20.5	15.0	38.6
2011	47	20	25	2	22.0	13.2	51.2
2012	43	21	20	2	20.2	13.9	40.8
2013	64	39	20	5	29.7	25.4	41.0

^{1.} Maternal deaths are assigned to ICD6: 640-689 in 1950, ICD7: 640-689 in 1960, ICD8: 630-678 in 1970-1978, ICD9: 630-676 in 1979-1998, and ICD10: A34, O00-O95, O98-O99 in 1999 to present.

^{2.} Numerator of ratio is based on deaths by race of decedent from 1950 to present and denominator of ratio is based on live births by race of infant from 1950 and 1960 and live births





TABLE 16: RECORDED FETAL DEATHS BY MONTH, BY COUNTY, FLORIDA, 2015 PROVISIONAL DATA AS OF 04/27/2015

COUNTY	TOTAL	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	ост	NOV	DEC
FLORIDA	346	135	103	94	14	0	0	0	0	0	0	0	0
ALACHUA	11	6	1	4	0	0	0	0	0	0	0	0	0
BAKER	0	0	0	0	0	0	0	0	0	0	0	0	0
BAY	2	1	0	1	0	0	0	0	0	0	0	0	0
BRADFORD	0	0	0	0	0	0	0	0	0	0	0	0	0
BREVARD	6	4	1	1	0	0	0	0	0	0	0	0	0
BROWARD	35	18	8	8	1	0	0	0	0	0	0	0	0
CALHOUN	0	0	0	0	0	0	0	0	0	0	0	0	0
CHARLOTTE	2	1	0	1	0	0	0	0	0	0	0	0	0
CITRUS	1	1	0	0	0	0	0	0	0	0	0	0	0
CLAY	3	2	1	0	0	0	0	0	0	0	0	0	0
COLLIER	3	2	1	0	0	0	0	0	0	0	0	0	0
COLUMBIA	2	1	1	0	0	0	0	0	0	0	0	0	0
MIAMI-DADE	41	14	15	11	1	0	0	0	0	0	0	0	0
DESOTO	0	0	0	0	0	0	0	0	0	0	0	0	0
DIXIE	0	0	0	0	0	0	0	0	0	0	0	0	0
DUVAL	30	11	11	6	2	0	0	0	0	0	0	0	0
ESCAMBIA	15	6	3	5	1	0	0	0	0	0	0	0	0
FLAGLER	0	0	0	0	0	0	0	0	0	0	0	0	0
FRANKLIN	0	0	0	0	0	0	0	0	0	0	0	0	0
GADSDEN	0	0	0	0	0	0	0	0	0	0	0	0	0
GILCHRIST	0	0	0	0	0	0	0	0	0	0	0	0	0
GLADES	0	0	0	0	0	0	0	0	0	0	0	0	0
GULF	0	0	0	0	0	0	0	0	0	0	0	0	0
HAMILTON	0	0	0	0	0	0	0	0	0	0	0	0	0
HARDEE	0	0	0	0	0	0	0	0	0	0	0	0	0
HENDRY	0	0	0	0	0	0	0	0	0	0	0	0	0
HERNANDO	1	1	0	0	0	0	0	0	0	0	0	0	0
HIGHLANDS	3	1	1	1	0	0	0	0	0	0	0	0	0
HILLSBOROUGH	36	12	10	13	1	0	0	0	0	0	0	0	0
HOLMES	0	0	0	0	0	0	0	0	0	0	0	0	0
INDIAN RIVER	0	0	0	0	0	0	0	0	0	0	0	0	0
JACKSON	1	0	1	0	0	0	0	0	0	0	0	0	0
JEFFERSON	0	0	0	0	0	0	0	0	0	0	0	0	0
LAFAYETTE	0	0	0	0	0	0	0	0	0	0	0	0	0
LAKE	4	0	1	2	1	0	0	0	0	0	0	0	0
LEE	13	4	3	6	0	0	0	0	0	0	0	0	0
LEON	7	1	4	2	0	0	0	0	0	0	0	0	0
LEVY	0	0	0	0	0	0	0	0	0	0	0	0	0
LIBERTY	0	0	0	0	0	0	0	0	0	0	0	0	0
MADISON	0	0	0	0	0	0	0	0	0	0	0	0	0
MANATEE	4	1	0	1	2	0	0	0	0	0	0	0	0
MARION	7	2	4	1	0	0	0	0	0	0	0	0	0

Data Development Agenda:

- Which hospitals are performing more C-sections? Can we access physician data? Can we access if this is first or subsequent C-section?
- Can we obtain rates of inductions through JCAHO, HEDIS, Perinatal Quality Collaborative?

Accomplishments:

 Submitted HFSF proposal for additional Showers2Empower in Hispanic community and north Broward County, videos to be shown in WIC, Early Childhood Court and Child Support waiting areas, social media and marketing support, development of comprehensive toolkit to be distributed to OB/GYNs and Pediatricians

Challenges:





Misinformation is being given to women about their delivery options

Best Practices/What Works/Low-Cost/No-Cost/Off the Wall Ideas:

- Utilization of Doulas
- Engagement of Family Care Physicians
- Education of OB/GYNs, Pediatricians, Primary Care Doctors
- Education of Middle and High School Students
- Education of Early Childcare Providers
- Social Media engagement-text messaging, Facebook

Who are the Stakeholders to be Engaged?

- Insurance Companies
- Pediatricians
- Family Practice Physicians
- OB/GYNs
- School Board of Broward County
- Early Childcare Providers (ELC)
- WIC
- Medical Schools
- Women In Distress

What are our next steps?

- Discuss opportunity to merge Healthy Babies are Worth the Wait initiative meeting with the Maternal Health Committee meeting
- Invite School Board of Broward County, Memorial's Teen Pregnancy Prevention Program and Women In Distress to next meeting
- Develop a Palm Card with information for mothers (and fathers) to be (research what has already been created)
- Create a symposia for physicians to address the challenges identified (perhaps in cooperation with Perinatal HIV)
- Continue to promote practices at Showers2Empower (perhaps include a session on the use of midwives and doulas)
- Focus on LifeCourse-work with Broward County Schools regarding sexual health education
- Ask March Of Dimes if they have a pamphlet for distribution for Healthy Babies are Worth the Wait (HBWW)
- Develop educational handout (BRAINS-Benefits, Risks, Adverse Effects, Indicators, No, Sequelae)
- Develop information to include in Comprehensive Toolkit