Over the last few decades, there has been a significant growth in the measurement and reporting of health care quality outcomes. As health care evolves, it is important to continue to monitor and report on the quality of care delivered to patients in California and across the US. This is part of a series of measures CHCF is publishing on the quality of care in our state. Topics range from maternal to end-of-life care, and include measures on behavioral health, chronic conditions, and providers.

This set of quality measures focuses on maternal health and childbirth.

**More Asian and white women initiated prenatal care in the first trimester than Latina and Black women.**

While 88% of Asian and white mothers initiated prenatal care in the first trimester, only 80% of Black mothers and 82% of Latina mothers did so. Initiating prenatal care in the first trimester is considered a marker of high quality care.

![Initiated Prenatal Care in First Trimester, by Race/Ethnicity, California, 2018](chart)

Source: CDC WONDER Online Births Database, Centers for Disease Control and Prevention.
Black infants were more likely to be born preterm or at a low birthweight than infants of other races and ethnicities.

In 2018, about one in eight Black infants were born preterm or with a low birthweight. Infants born preterm or with a low birthweight have increased risk for lifelong health problems or dying before their first birthday.

Notes: Low birthweight is less than 2,500 grams. Preterm is less than 37 completed weeks of gestation. The US government’s Healthy People 2020 establishes science-based 10-year national objectives for improving the health of all Americans; visit www.healthypeople.gov.

Source: CDC WONDER Online Births Database, Centers for Disease Control and Prevention
The Black infant and maternal mortality rates were much higher than other races and ethnicities.

Black infants in California died at rates that were two times higher than Asian and white infants. The disparities were even greater for women giving birth, with mortality rates for Black women nearly four times higher than for white women.

Infant Mortality Rates, by Race/Ethnicity, California, 2016

Maternal Mortality Rates, by Race/Ethnicity, California, 2011 to 2013

Notes: Infant deaths within one year of birth. Maternal deaths 42 days or less postpartum. The US government’s Healthy People 2020 establishes science-based 10-year national objectives for improving the health of all Americans; visit www.healthypeople.gov.

Black women reported higher rates of prenatal and postpartum depressive symptoms than women of other races and ethnicities.

Many women in California suffer from prenatal or postpartum depression, which can negatively impact the woman and child. Over one in four Black women reported experiencing symptoms of prenatal depression, and over one in six reported experiencing symptoms of postpartum depression in 2016 and 2017.

**Notes:** Data from a population-based survey of 13,062 California resident women with a recent live birth; 2016 and 2017 data were combined. Percentage of women who had a live birth who felt sad, empty, or depressed for most of the day and lost interest in most things she usually enjoyed for two weeks or longer during pregnancy (prenatal) or for two weeks or longer since most recent live birth (postpartum).

Source: Custom data request, Maternal and Infant Health Assessment (MIHA), California Dept. of Public Health, received June 19, 2019.