

Maternal Child Health



The health of mothers, infants, and children is important for the health of the current generation and future generations. Healthy growth and development of infants depends on the health of the mother before conception and the health and safety of mother and infant during delivery. A positive, supportive environment for mother and infant following birth is also critical.

Key trends in Maternal Child Health

More births are occurring to mothers who may be less prepared or have fewer resources, including moms who are unmarried, in their late teens or on Medical Assistance or MinnesotaCare. More mothers are starting prenatal care after the first trimester. More 12th graders are sexually active, and those who are sexually active report a reduced rate of always using birth control.

**Community
Health
Profiles**

Dakota
COUNTY

Pregnancies and births in Dakota County

- Dakota County had an estimated 80,452 women of childbearing age (15-44 years) in 2010.
- In 2010, there were 5,173 births to Dakota County residents.

Pre-conception risk factors can affect the outcome of a pregnancy

- Sixty percent of U.S. women of childbearing age did not take folic acid supplements daily (2007).
- In 2010, six percent of Dakota County mothers smoked during pregnancy, a slight increase from 2006.

Unintended pregnancy

- Fourteen percent of pregnancies in Dakota County residents resulted in induced abortions, similar to the state percent (2010). The abortion rate per 1,000 females ages 15-44 dropped by 15 percent from 2006 to 2010.
- Twenty-eight percent of live births to Dakota County residents in 2010 were to unmarried mothers – a percent that has steadily increased from 19 percent in 2001. (NOTE: Not all births to unmarried mothers are unintended).
- Two percent of live births to Dakota County mothers were to mothers younger than 19 years old (2010).
- Thirty-seven percent of Minnesota mothers surveyed in 2008 said their pregnancy was unintended.

Infant mortality

- In 2010, 18 Dakota County infants under one year died. The rate declined from 2001 to 2009.
- Perinatal deaths (deaths around time of birth) decreased from 2003 to 2009.

Early prenatal care is associated with improved birth outcomes

- Eighty-six percent of Dakota County mothers started prenatal care in the first trimester (2010).
- Two percent of Dakota County mothers started prenatal care in the third trimester or had no prenatal care (2010).
- In 2010, four percent of live singleton births in Dakota County were low-birthweight, similar to the state. The percentage remained steady between 2001 and 2010.
- Seven percent of singleton births in 2010 in Dakota County were preterm, a percentage that is slightly below the state overall (eight percent).
- One in ten women suffer from depression during pregnancy or within the first year of delivery.

Birth defects

- An estimated 2,000 babies are born each year in Minnesota with a serious birth defect.
- Birth defects were one of the leading causes of death in infants under one year of age from 2006 to 2010 (28 percent of Dakota County infant deaths).
- Seventy percent of birth defects have unknown causes, and 10 percent are due to environmental causes – some preventable.

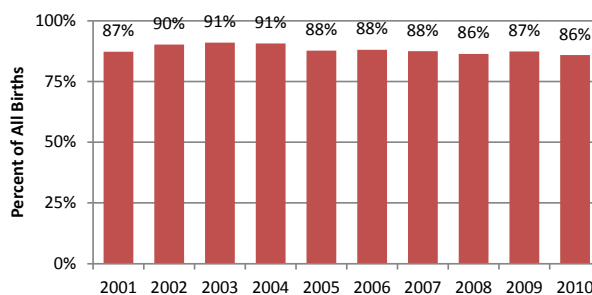
Teen pregnancy and parenting

- The rate of pregnancy for 15-19 year olds in Dakota County decreased by 15 percent from the period 2005-2007 to the period 2008-2010.
- The Dakota County rate for 15-19 year olds is below the state for the period of 2008-2010.

Adolescent reproductive health

- In 2010, 18 percent of Dakota County 9th graders and 52 percent of 12th graders reported ever being sexually active. The percent generally decreased from 1992 to 2010 for 9th graders. For 12th graders, there was a six percent increase from 2007 to 2010. In 2010, the percent (52 percent) was slightly above the state (49.5 percent).
- In 2010, 37 percent of 9th graders and 62 percent of 12th graders who were sexually active reported always using birth control. The percentage declined in both grades between 2001 and 2010.

Mothers Who Started Prenatal Care In the First Trimester Dakota County, 2001 - 2010



Source: Minnesota Department of Health

Children with special health needs

- The preschool population in Early Childhood Special Education grew by 28.5 percent from 2003 to 2011.
- Thirteen percent of the K-12 population was enrolled in special education in public schools in the 2010-11 school year, similar to Minnesota.

About this Community Health Profile

For more information about the Dakota County community health assessment, contact: Melanie Countryman, Epidemiologist (melanie.countryman@co.dakota.mn.us or 651-554-6131).

For more information:

- Bright Futures, American Academy of Pediatrics <http://brightfutures.aap.org/>
- U.S. Centers for Disease Control and Prevention (CDC) www.cdc.gov
- Minnesota Department of Health www.health.state.mn.us/divs/fh/mch/infant.html
- Association of Maternal & Child Health Programs www.amchp.org
- March of Dimes www.marchofdimes.com



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Dakota County Public Health Department
1 Mendota Road West, Suite 410
West St. Paul, MN 55118-4771
651-554-6100

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