

**North Carolina Institute of Medicine
Healthy NC 2020: Maternal and Infant Health Subcommittee
Friday, April 9, 2010**

Subcommittee Members and Other Interested Persons: Laura Edwards, Janice Freedman, Lisa Harrison, Joe Holliday, Sarah McCracken, Carolyn Moser, Debi Nelson, Susan Robinson, Sarah Verbiest

NCIOM Staff and Interns: Mark Holmes, Berkeley Yorkery, Catherine Liao

Proposed Final Objectives and Targets

The Maternal and Infant Health Subcommittee revisited draft objectives discussed at the first meeting. After data availability considerations and discussion on what types of objectives would drive local and state strategies to improve population health outcomes, the Subcommittee agreed on the following four objectives.

Objective 1: Reduce the infant mortality disparity*

Current: *to be determined*

2020 Target: *to be determined*

Data source: *to be determined*

Rationale for selection: The death rates for minority babies in North Carolina are more than twice the rate of white babies. This objective aims to reduce the racial disparity in infant deaths.

Rationale for target: To be determined.

Objective 2: Reduce smoking during pregnancy

Current: 11.4% (2006)

2020 Target: *to be determined*

Data source: National Vital Statistics Report

Rationale for selection: Smoking during pregnancy is associated with multiple adverse birth outcomes in the United States, including low birth weight births and pre-term deliveries. This objective aims to reduce maternal smoking during pregnancy.

Rationale for target: To be determined.

Objective 3a: Increase the percent of pregnant women initiating prenatal care in the first trimester

Current: 82.6% (2007)

2020 Target: 88.6%

Data source: National Vital Statistics Report

Rationale for selection: Early access to high-quality prenatal care reduces the risk of poor perinatal outcomes. This objective measures the percentage of women who began prenatal care in the first trimester of pregnancy. Inclusion of this objective will drive local and state strategies to increase the percentage of pregnant women beginning prenatal care in the first trimester.

Rationale for target: Based on the best state, which was Massachusetts (2007).

Objective 3b: Reduce the percent of women who get pregnant within six months of delivery to improve postpartum access to care

Current: 13.3% (2007)

2020 Target: 9.9%

Data source: Region IV Network for Data Management and Utilization

Rationale for selection: The interconception period is defined as the time between delivery and conception. This objective aims to improve women's postpartum access to care by reducing the percentage of women who get pregnant within six months of delivery. Inclusion of this objective will drive local and state strategies to reduce the percent of women who get pregnant within six months of delivery.

Rationale for target: Based on the best state in Region IV, which was Florida (2007).

*Key performance indicator

Next Steps

Because there was no consensus within the subcommittee, the NCIOM will take objectives 3a and 3b to the Steering Committee to select one of the two objectives for inclusion. The NCIOM will contact the State Center for Health Statistics to determine how to calculate the infant mortality disparity.