

NORTH CAROLINA

2005

Pregnancy Nutrition
Surveillance System

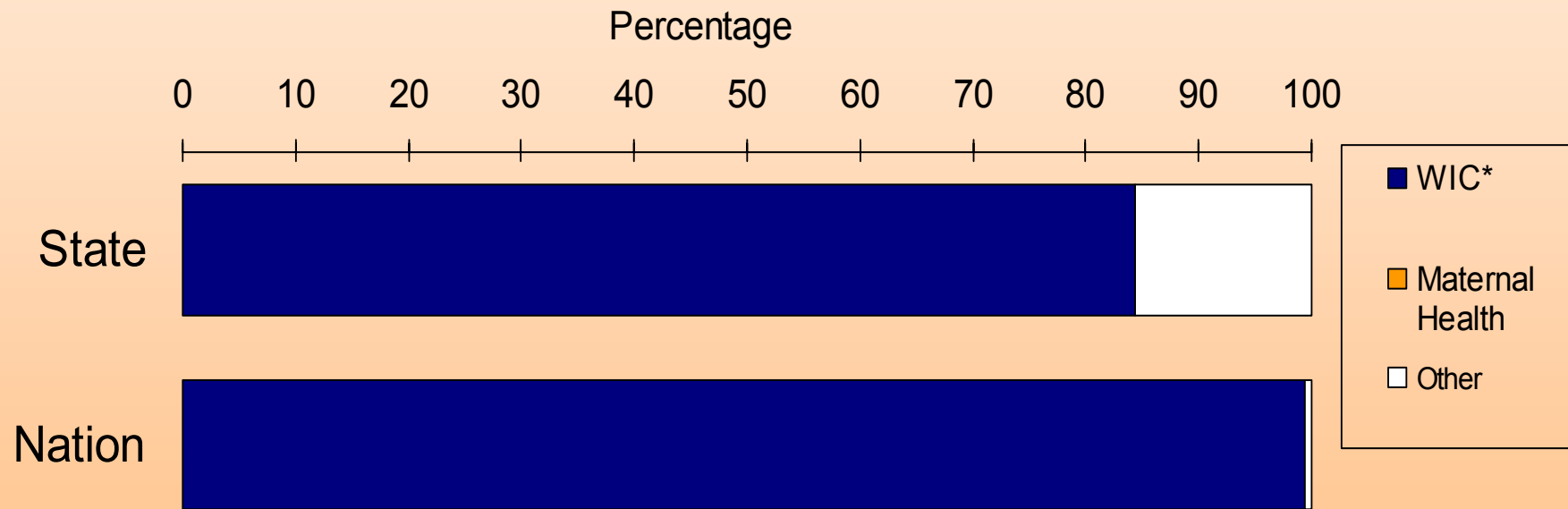
Graphics

Comparing Contributor and National Data

2004 (prior year) national PNSS data are presented.

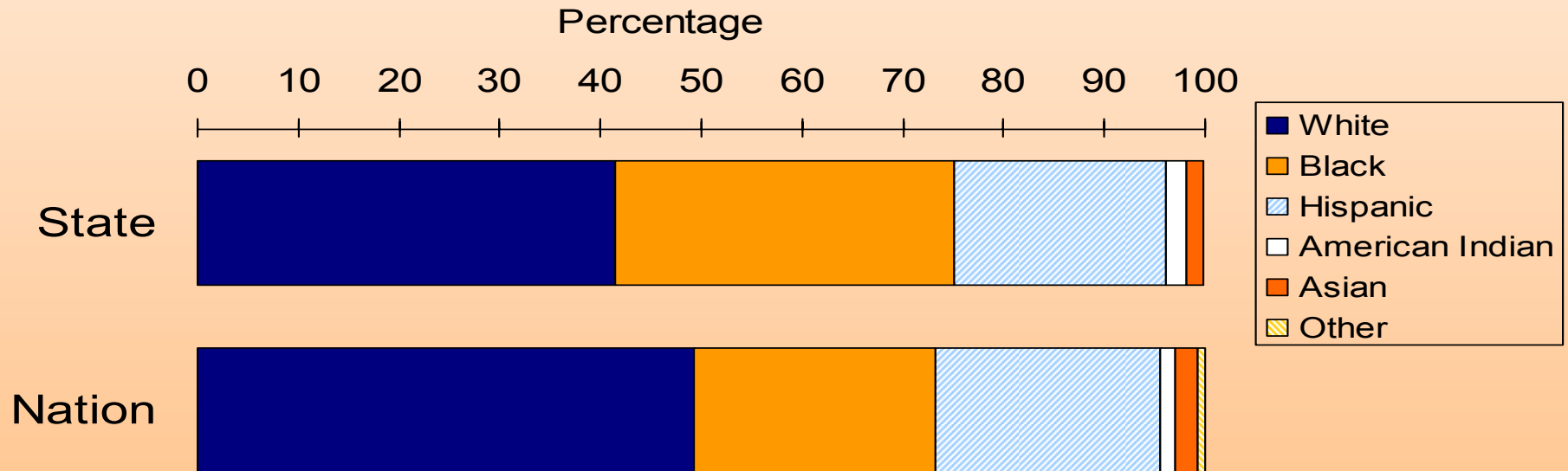
Contributors included 25 states, and 6 tribal governments.

Source of data

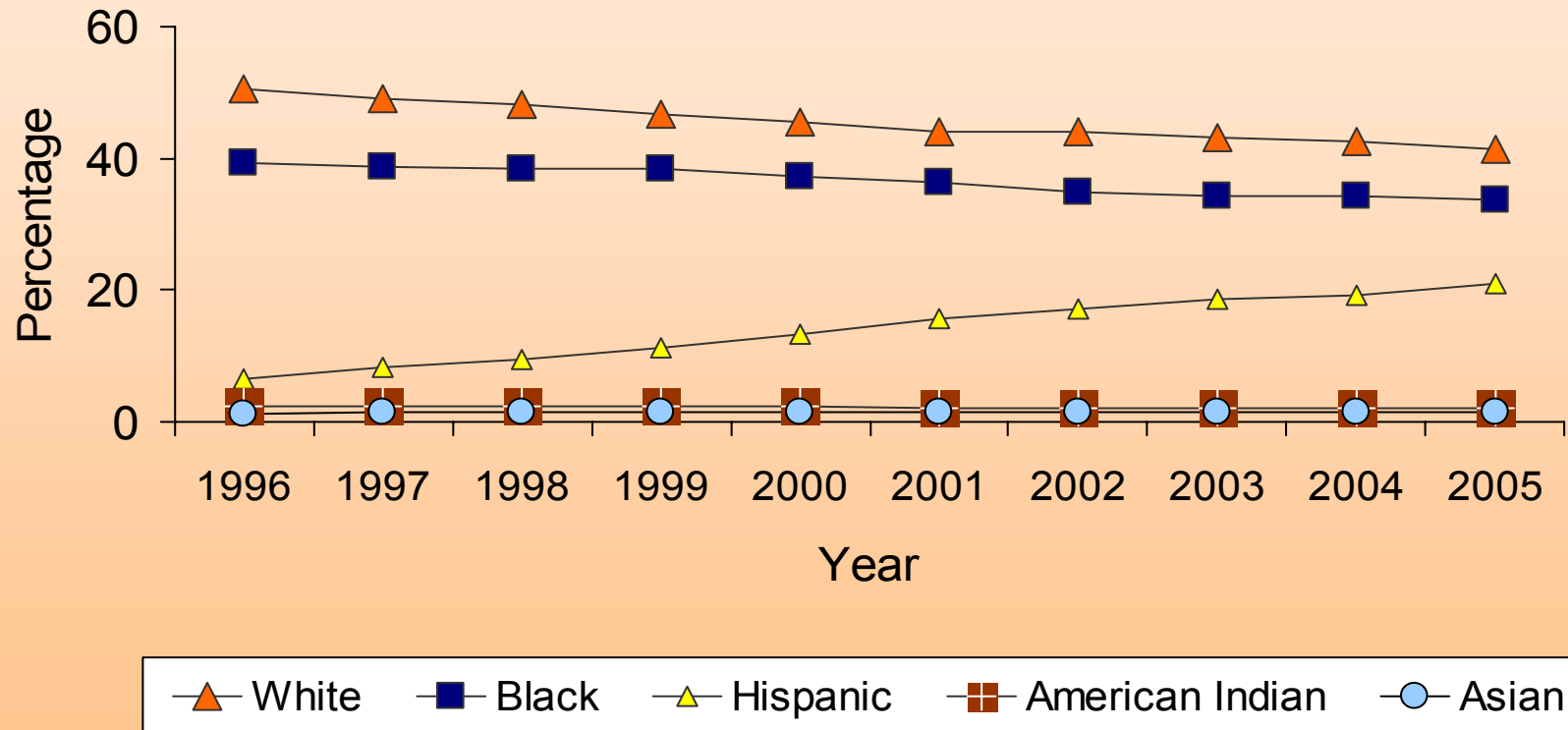


* *Special Supplemental Nutrition Program for Women, Infants and Children.*

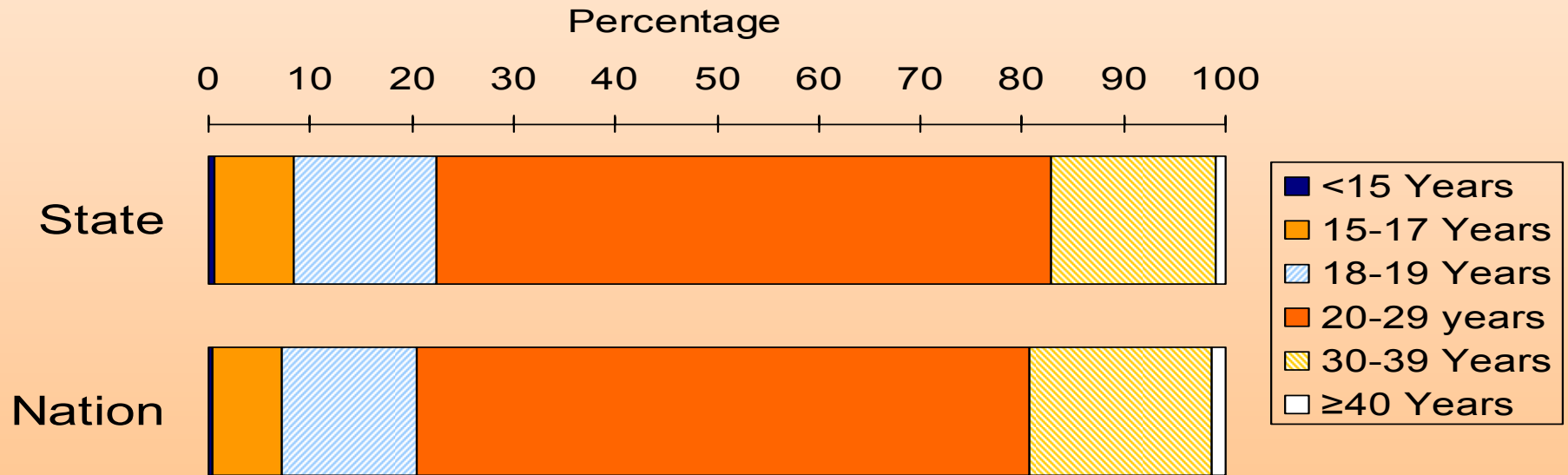
Racial and ethnic distribution



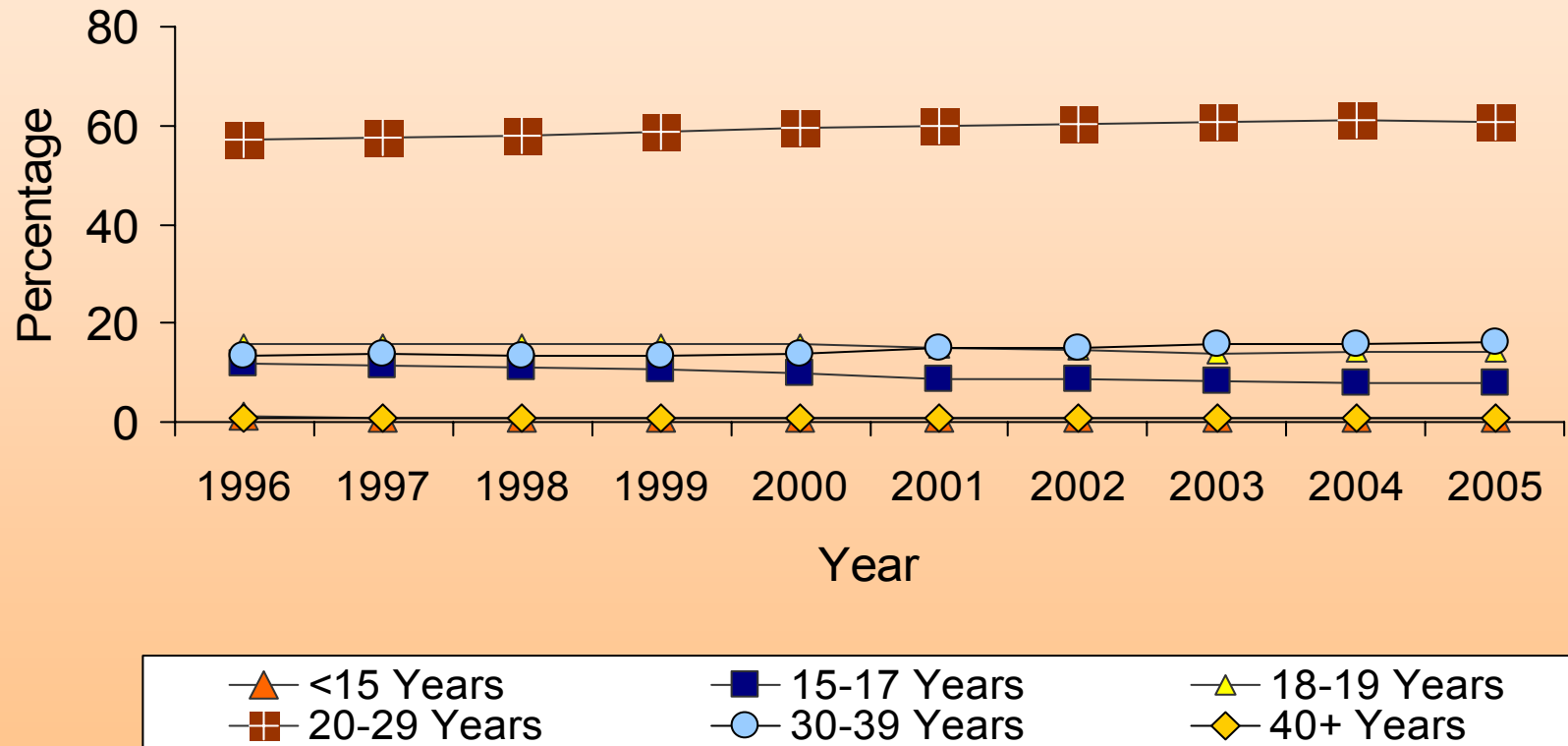
Trends in racial and ethnic distribution



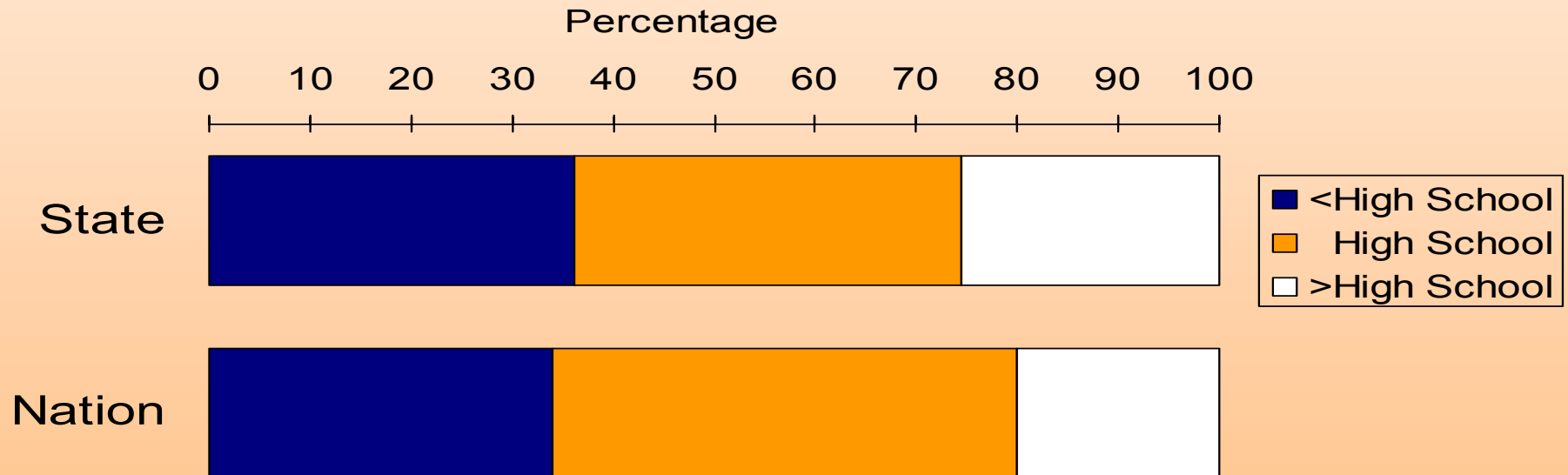
Age distribution



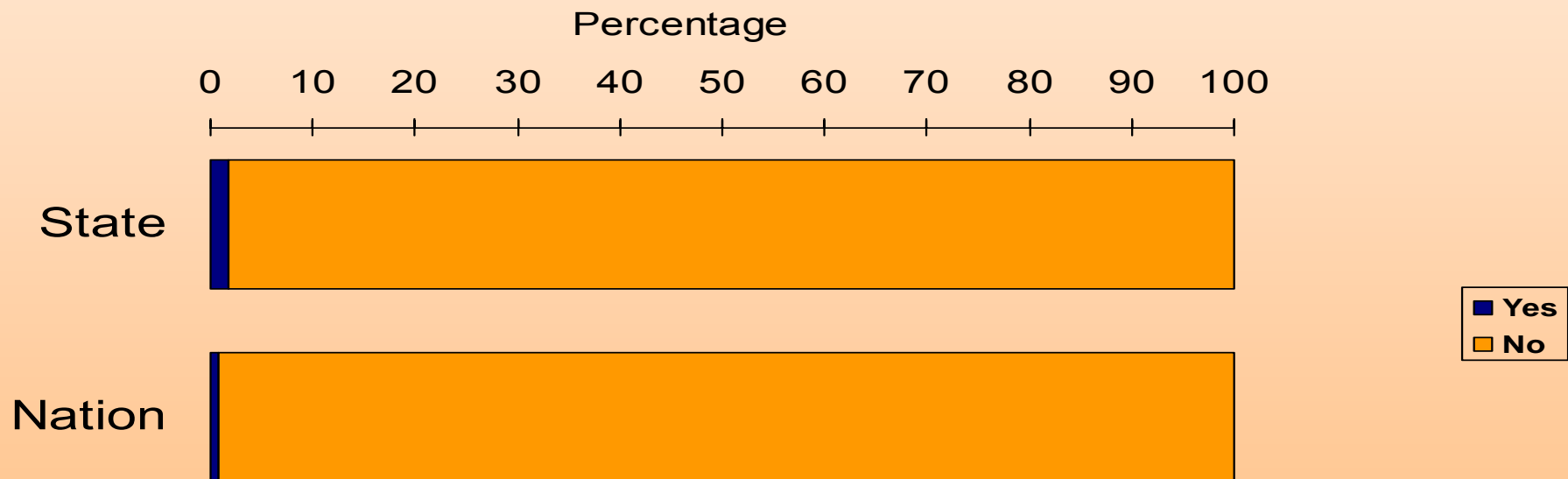
Trends in age distribution



Education level

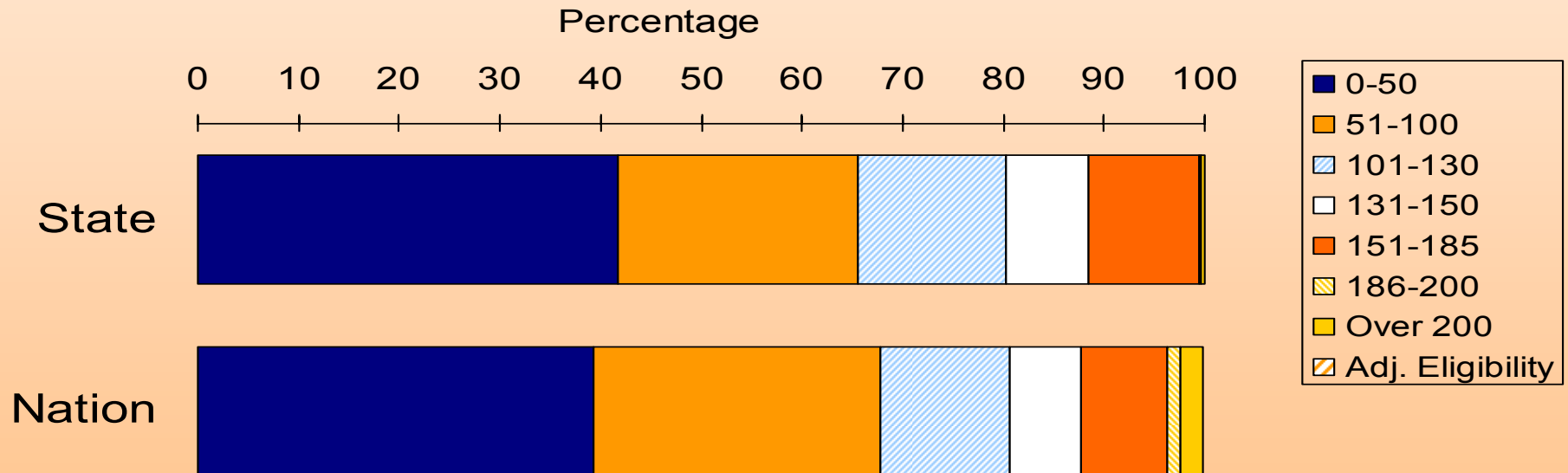


Migrant status

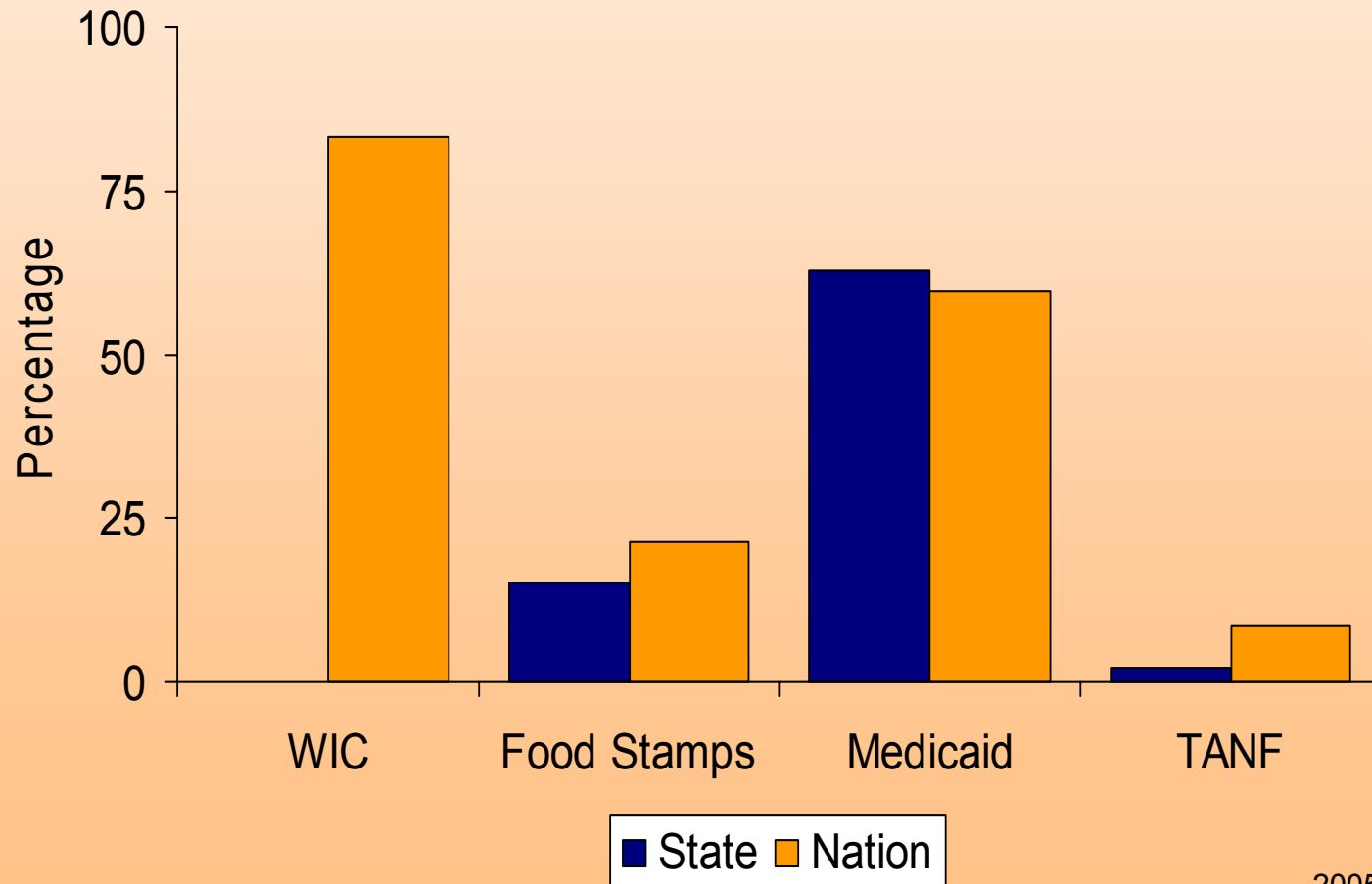


Household income

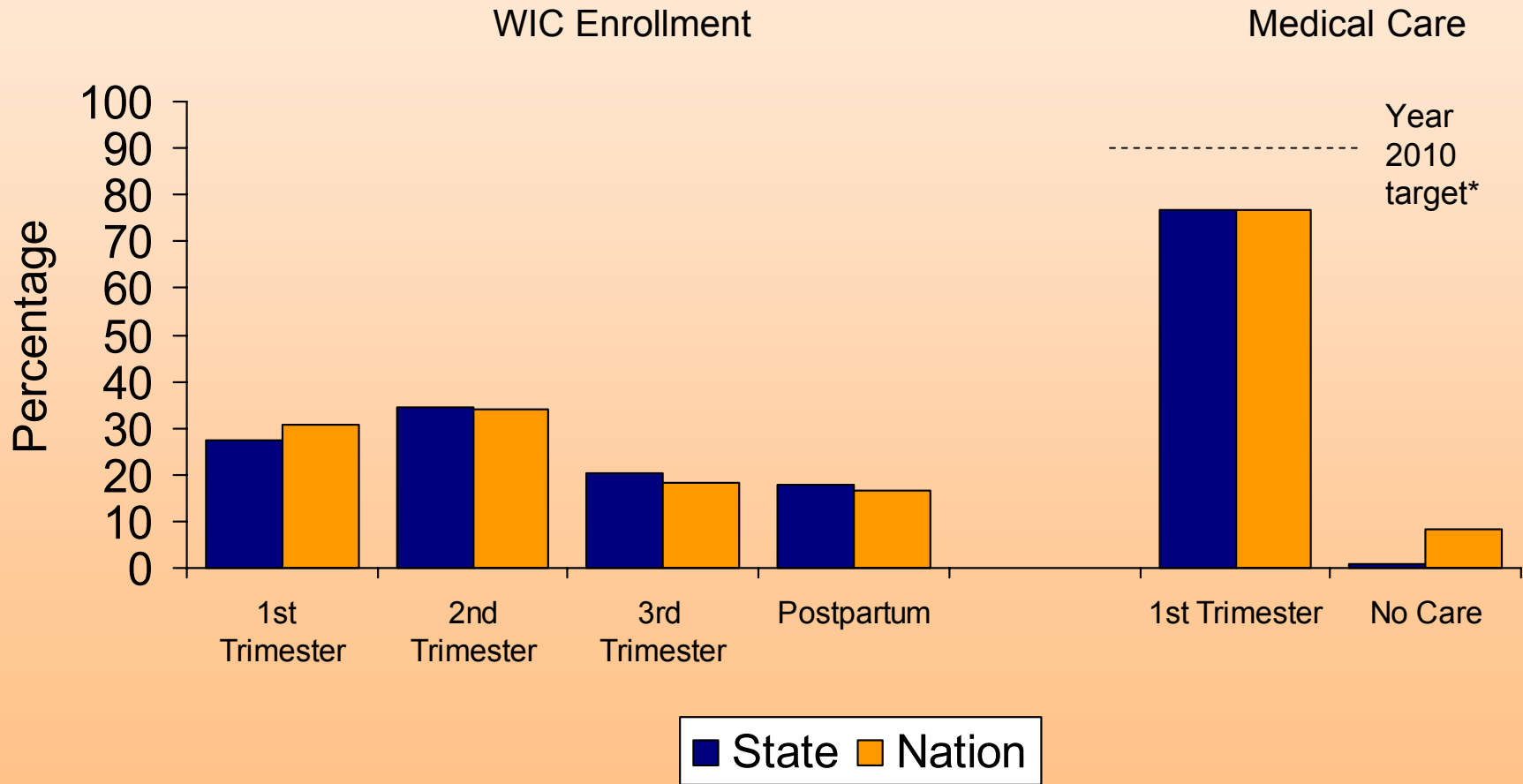
reported as percent poverty level



Program participation at initial prenatal visit

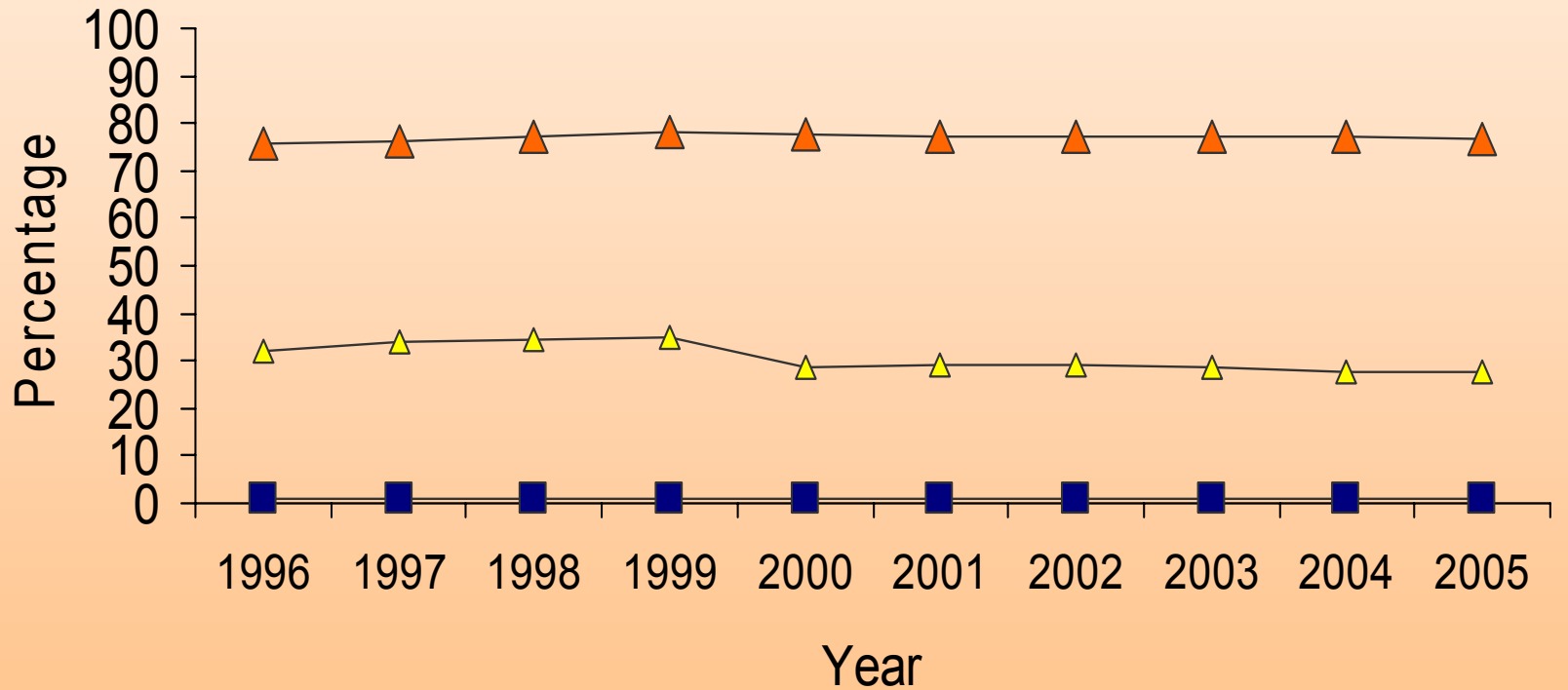


Timing of WIC enrollment and medical care



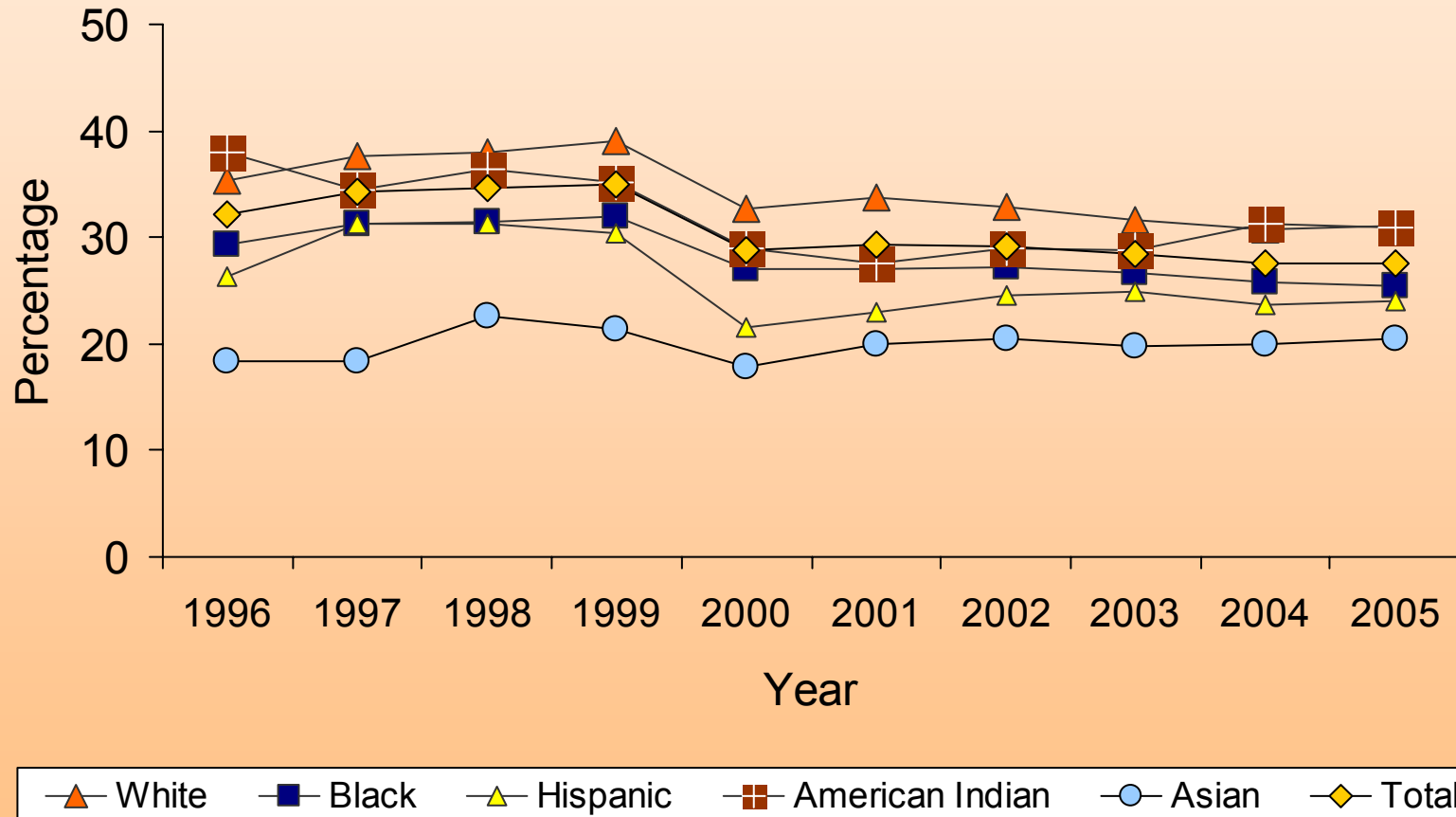
* Year 2010 target: 90% of pregnant women will enter into prenatal care during the first trimester.

Trends in WIC enrollment and medical care

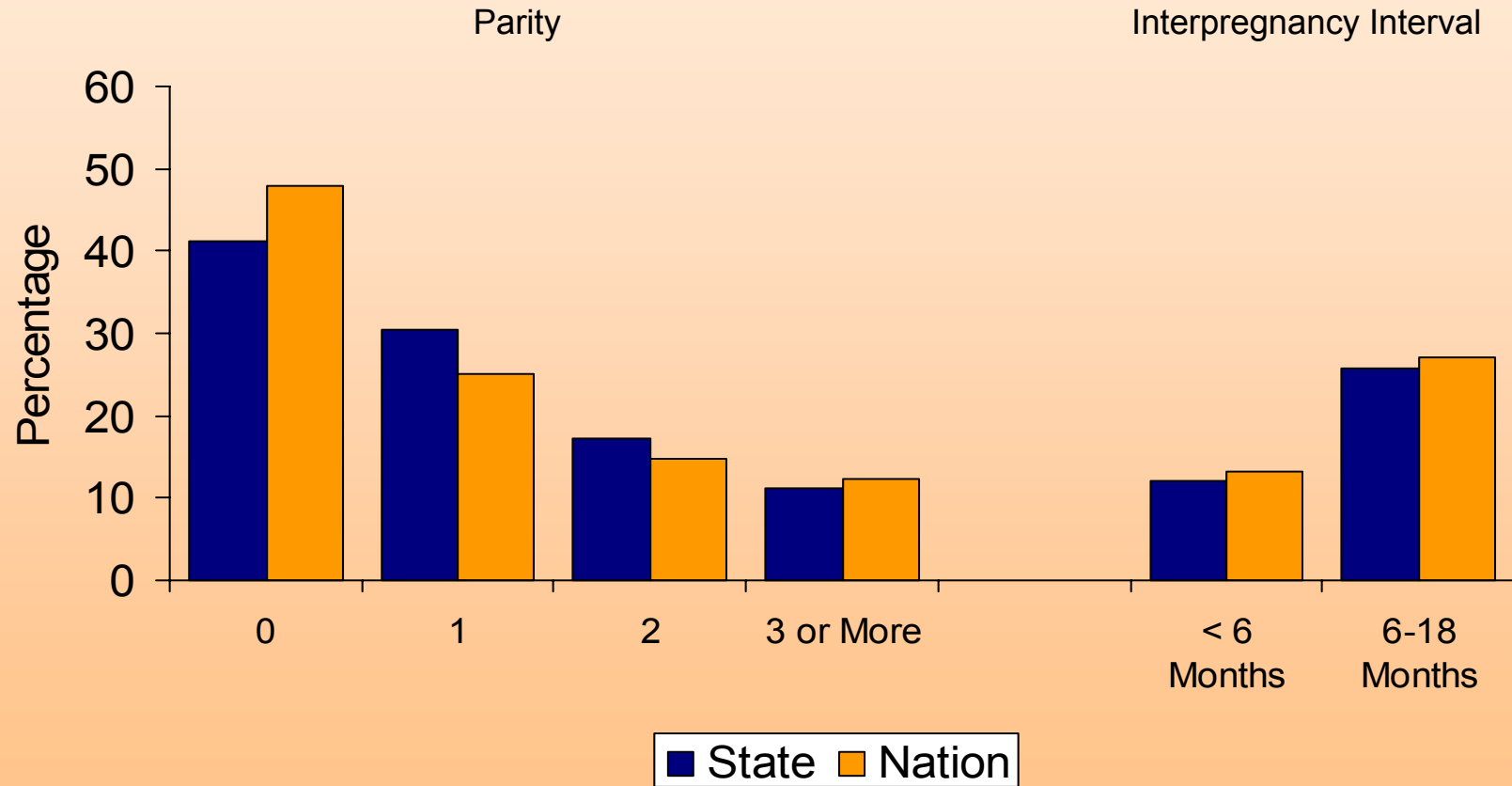


—▲— Medical Care 1st Trimester —■— No Medical Care —▲— 1st Trimester WIC Enrollment

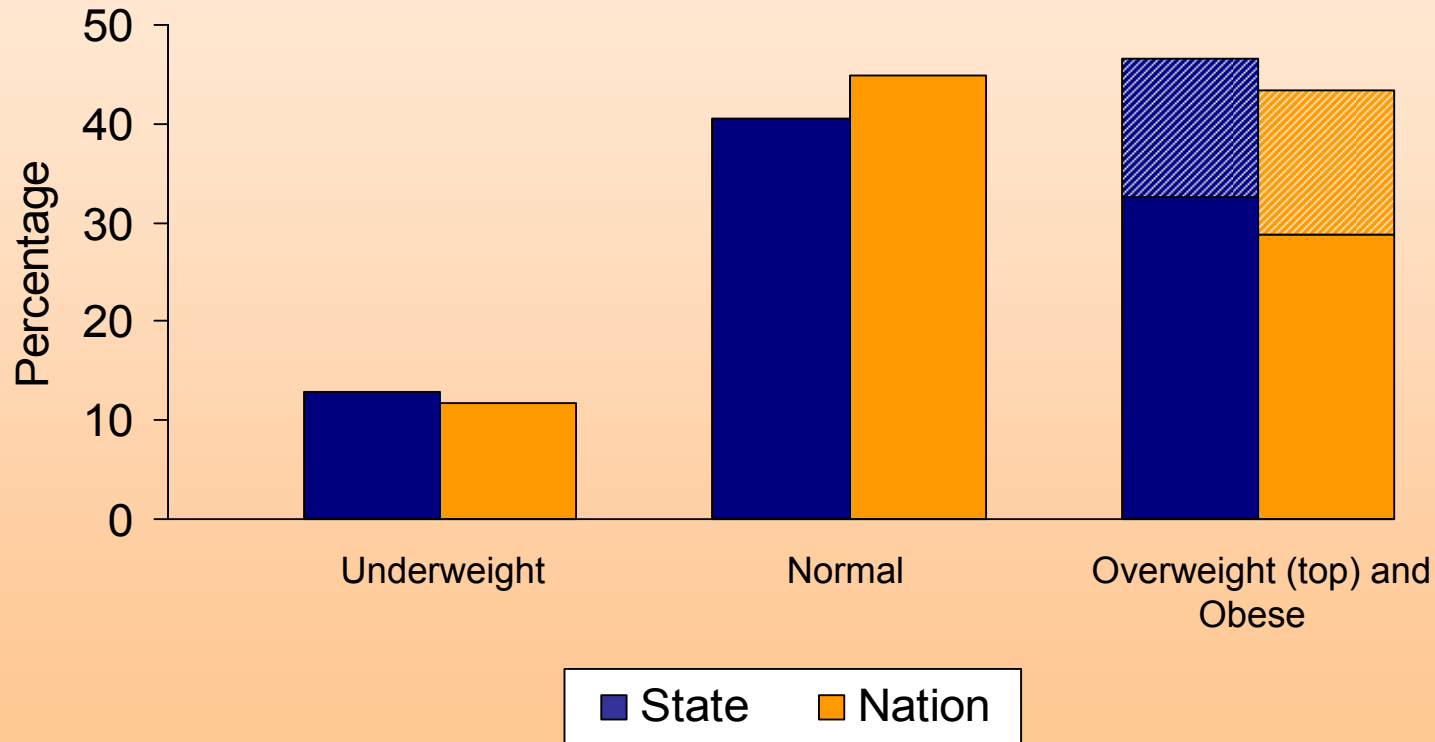
Trends in first trimester WIC enrollment by race and ethnicity



Parity and interpregnancy interval



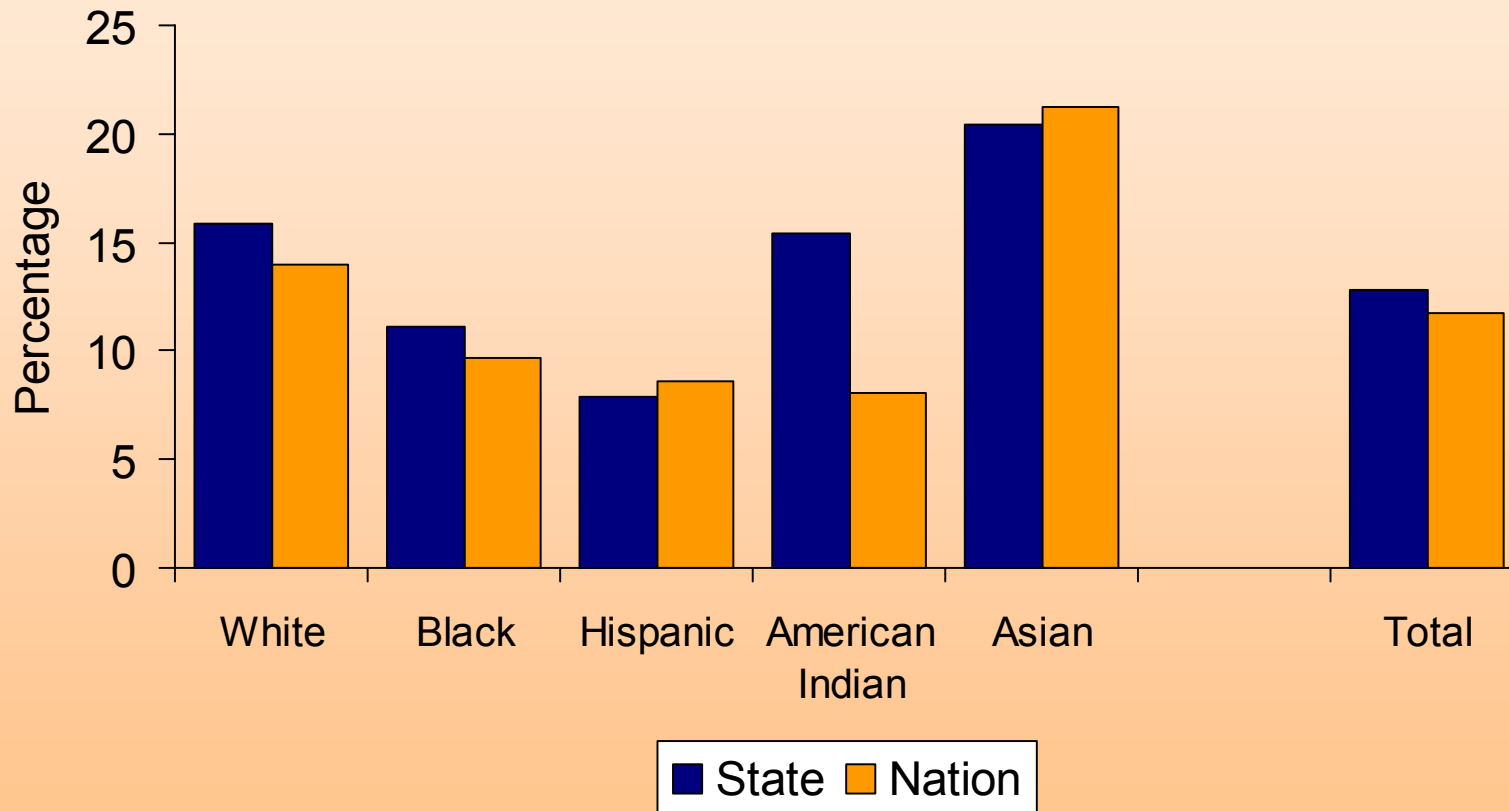
Prevalence of prepregnancy underweight and overweight*



* Underweight (BMI < 19.8); overweight (BMI = 26.0-29.0); and obese (BMI > 29.0).

Prevalence of prepregnancy underweight*

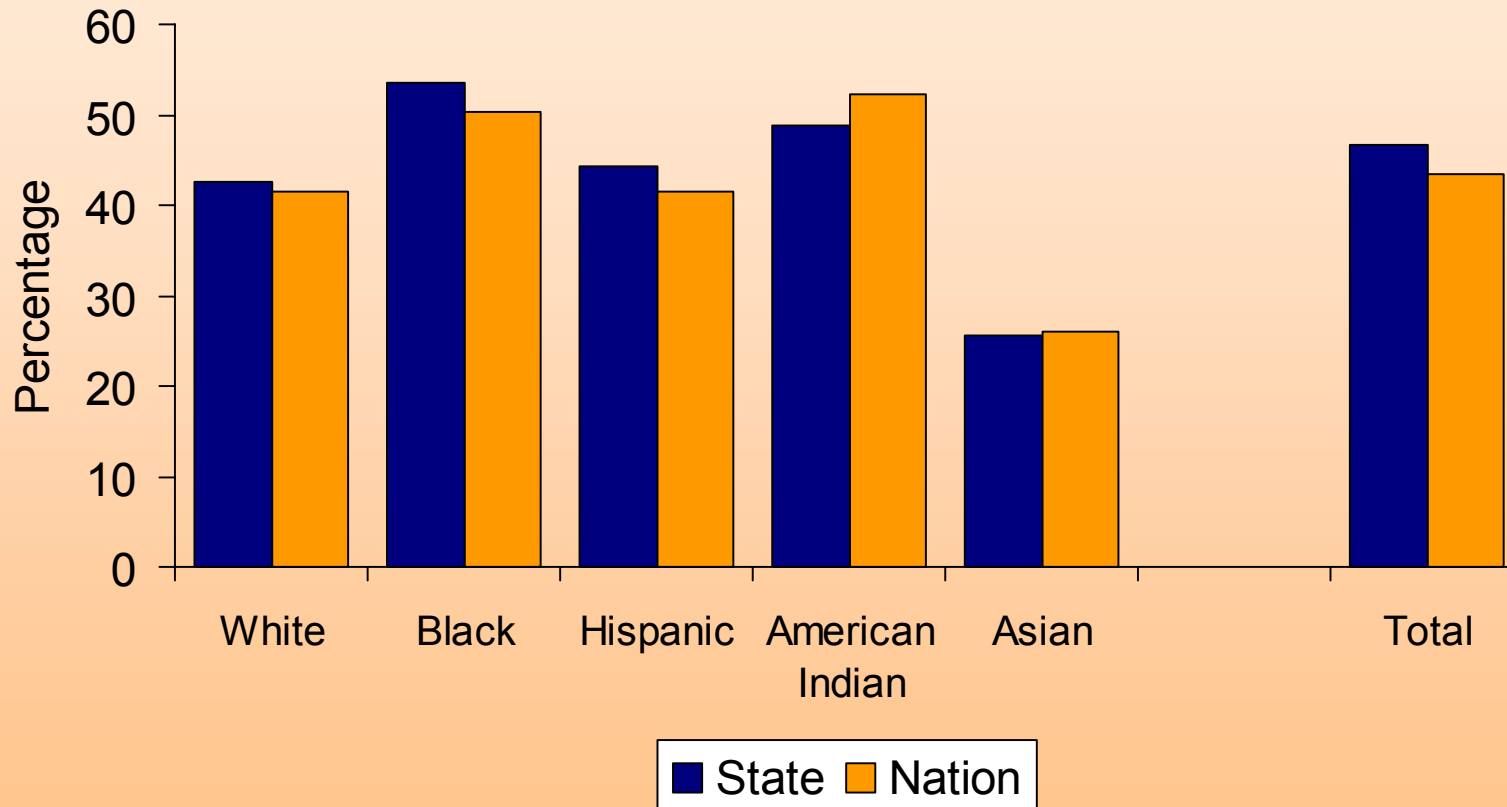
by race and ethnicity



* BMI < 19.8.

Prevalence of prepregnancy overweight*

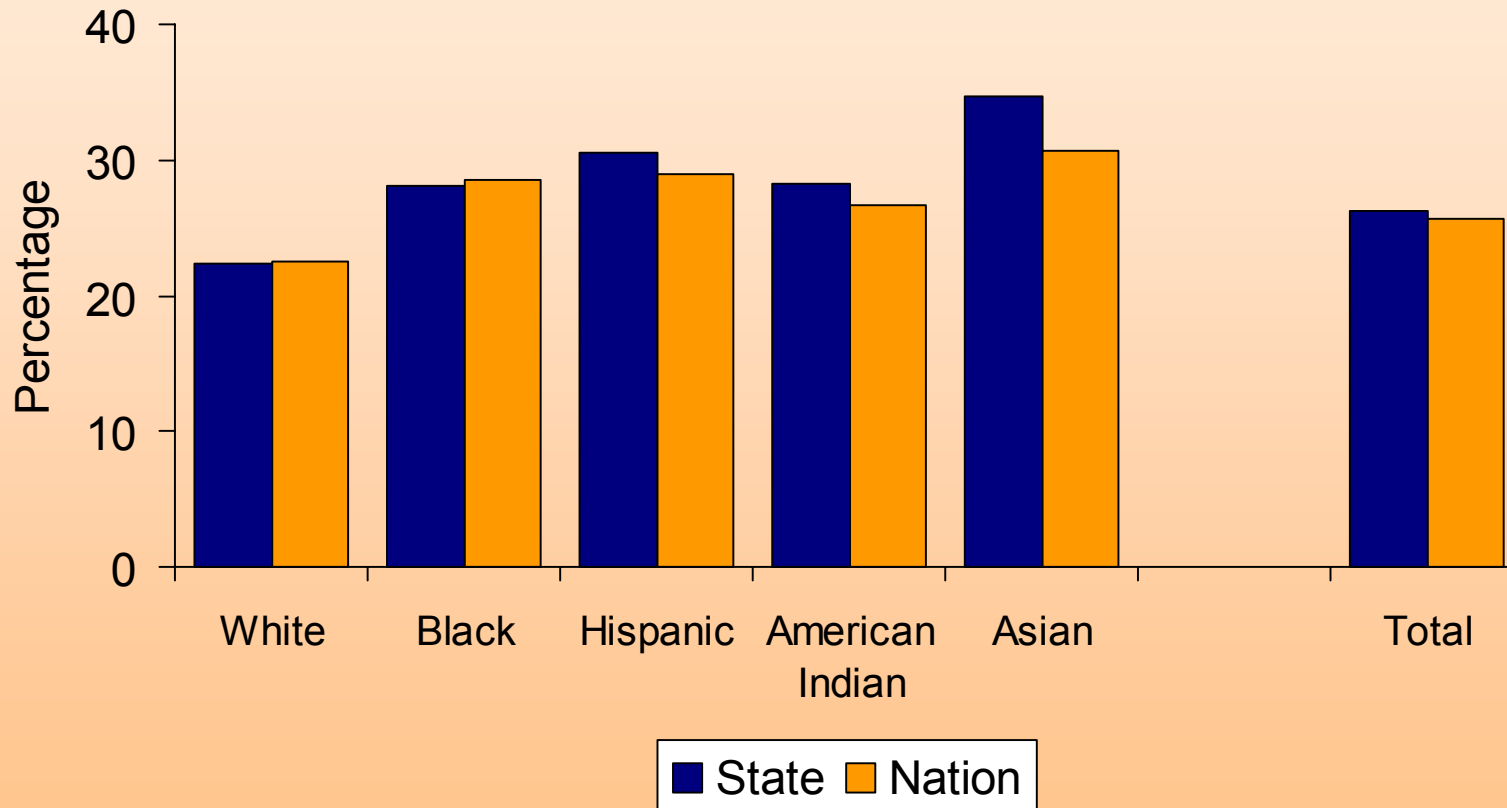
by race and ethnicity



* BMI \geq 26.0 (includes overweight and obese women).

Prevalence of less than ideal maternal weight gain*

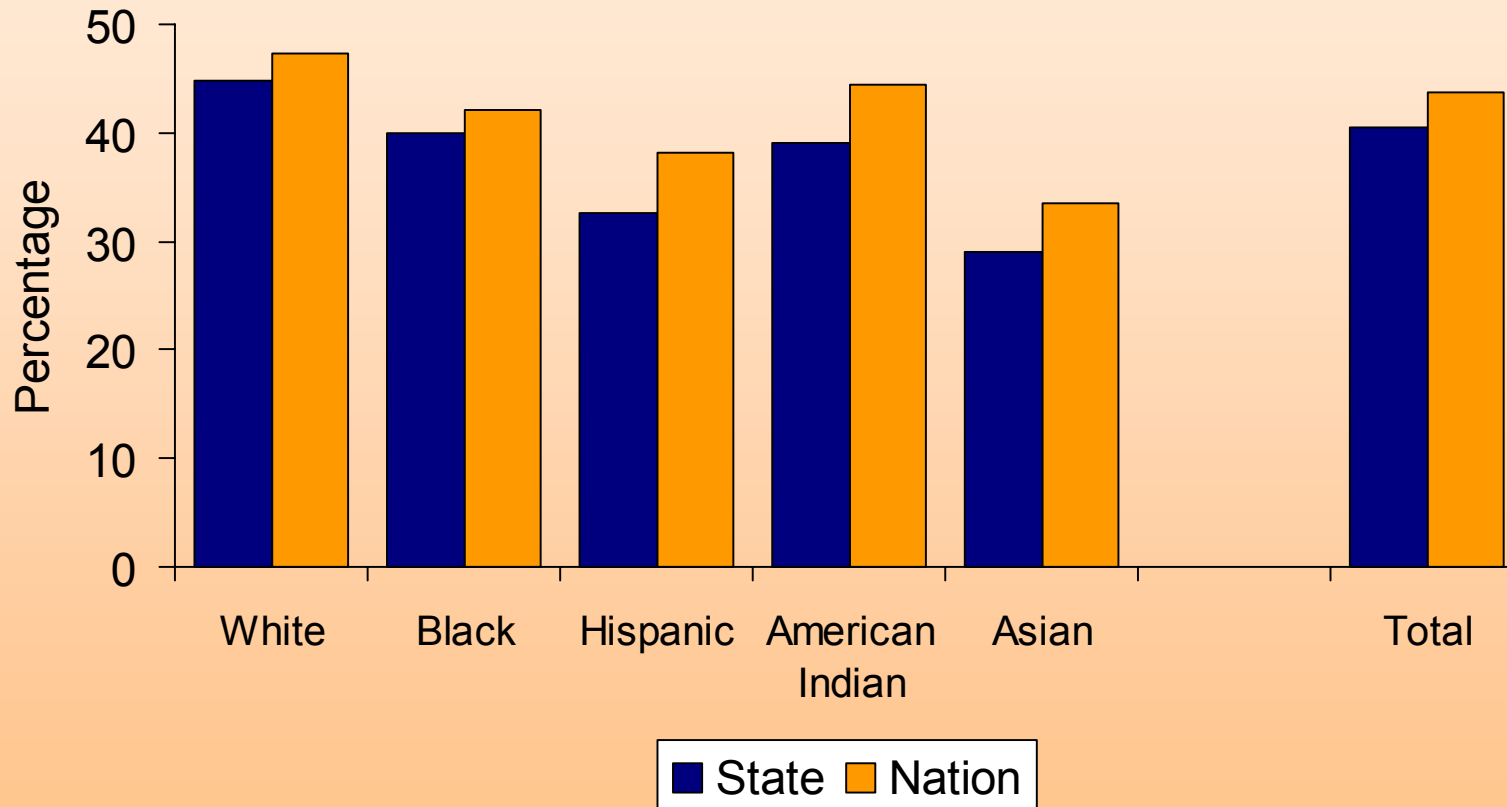
by race and ethnicity



* *Ideal weight gain: prepregnancy underweight = 28-40 pounds; prepregnancy normal weight = 25-35 pounds; prepregnancy overweight and obese = 15-25 pounds.*

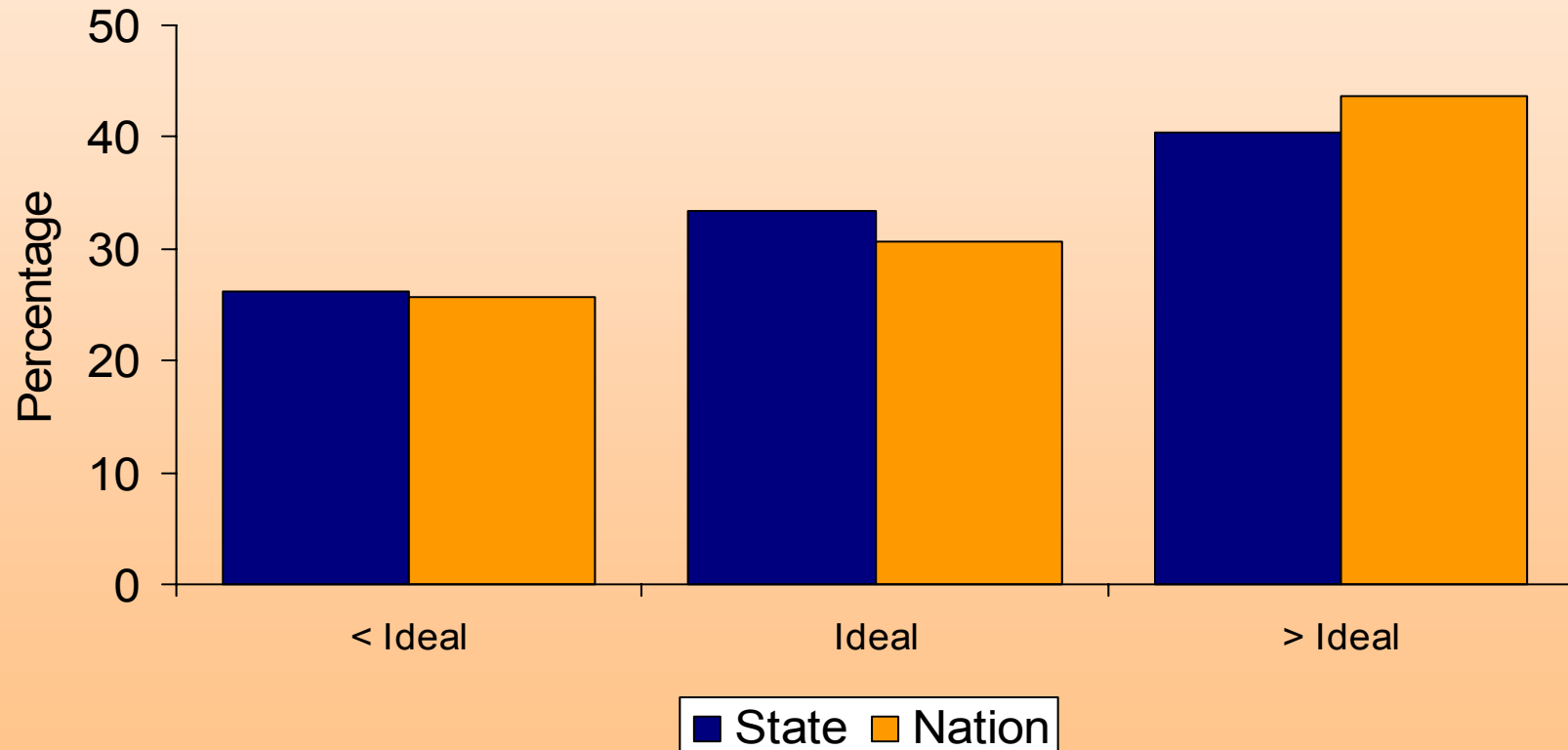
Prevalence of greater than ideal maternal weight gain*

by race and ethnicity



* *Ideal weight gain: prepregnancy underweight = 28-40 pounds; prepregnancy normal weight = 25-35 pounds; prepregnancy overweight and obese = 15-25 pounds.*

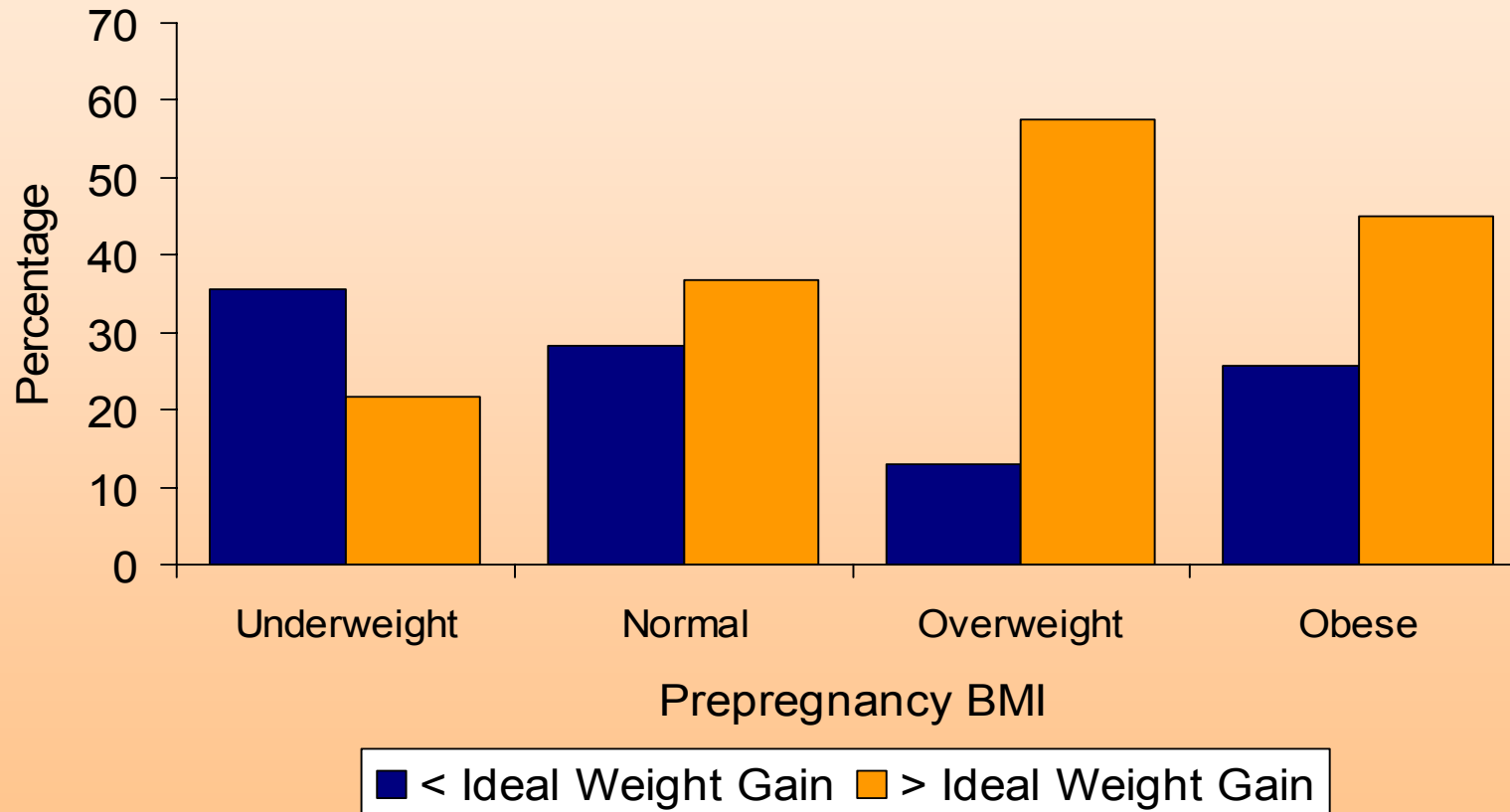
Prevalence of less than ideal, ideal and greater than ideal maternal weight gain*



* *Ideal weight gain: prepregnancy underweight = 28-40 pounds; prepregnancy normal weight = 25-35 pounds; prepregnancy overweight and obese = 15-25 pounds.*

Maternal weight gain*

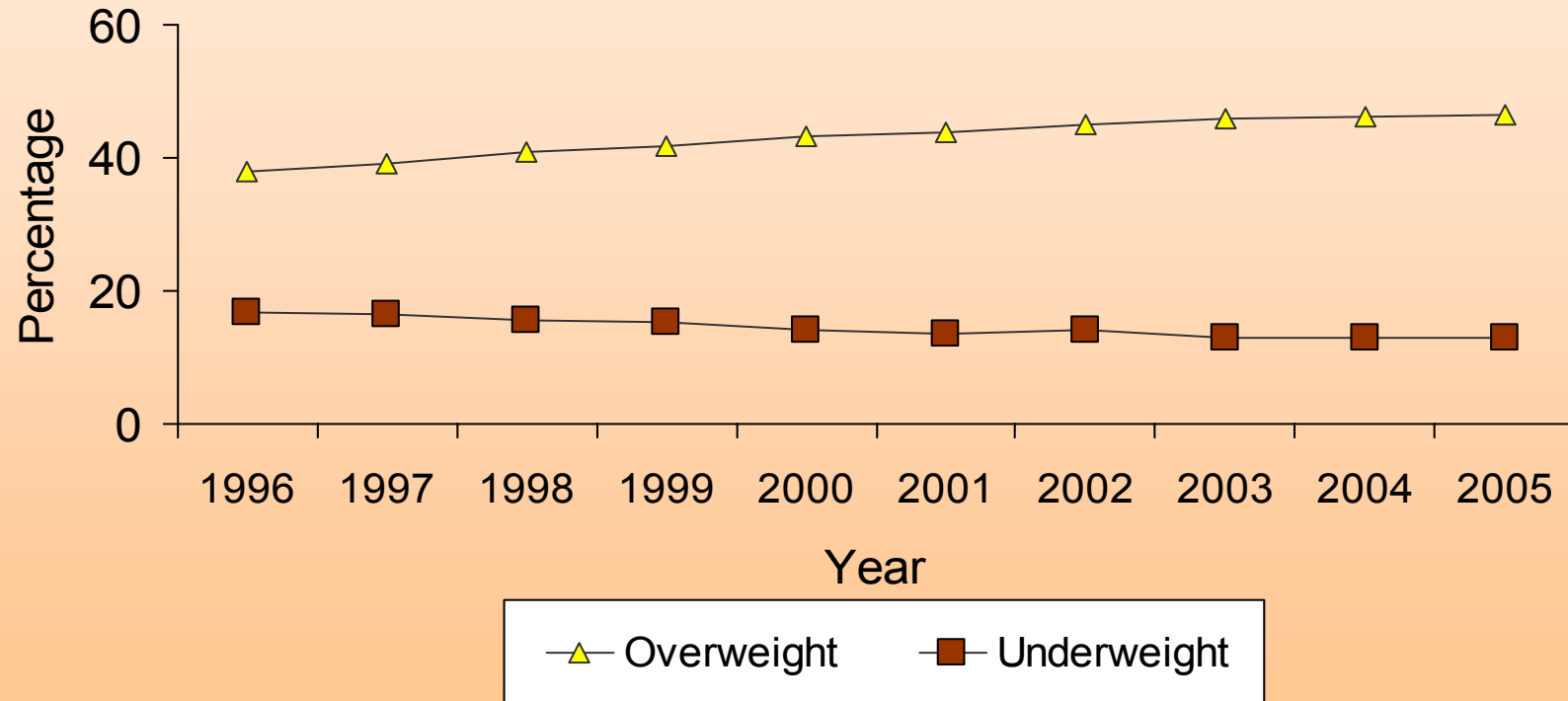
by prepregnancy BMI**



* Ideal weight gain: prepregnancy underweight = 28-40 pounds; prepregnancy normal weight = 25-35 pounds; prepregnancy overweight and obese = 15-25 pounds.

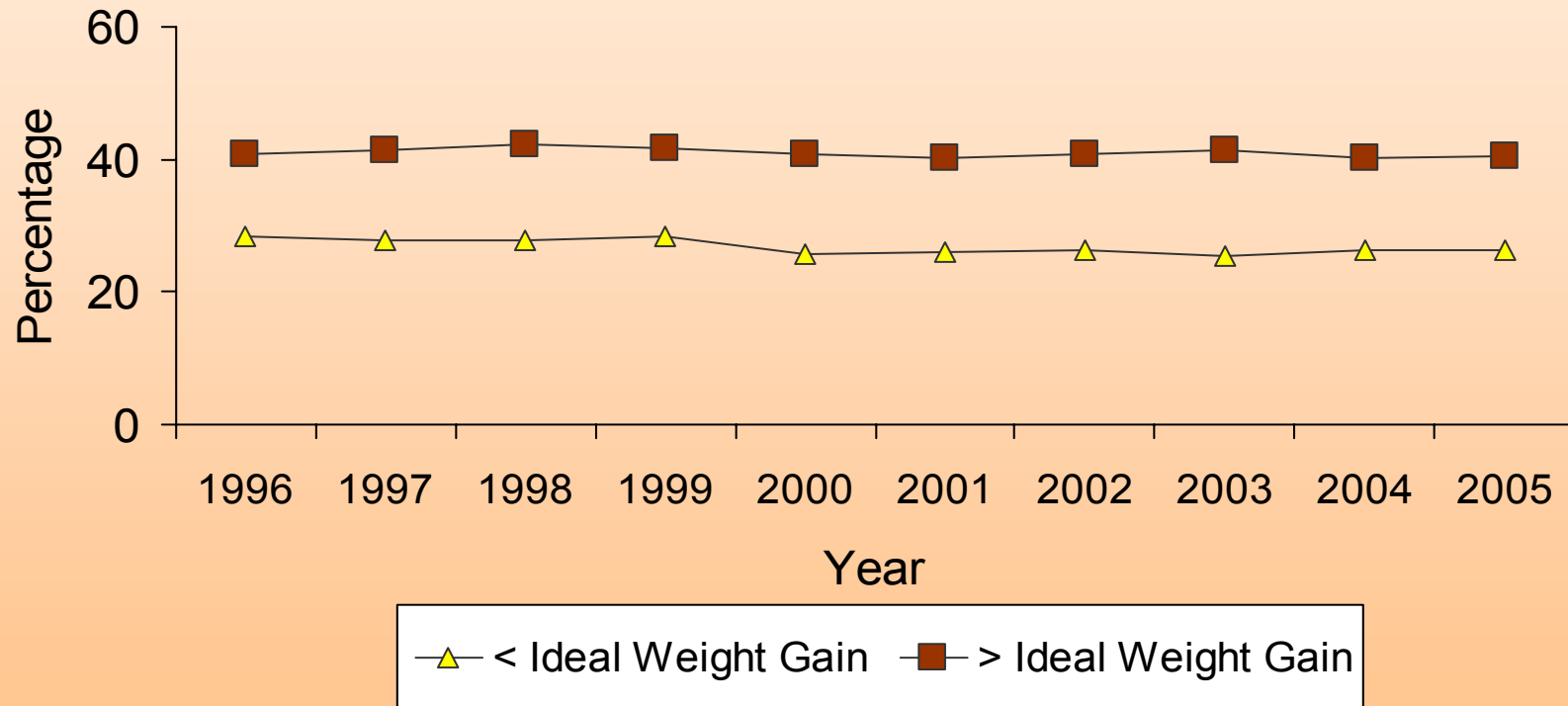
** Underweight (BMI < 19.8); overweight (BMI = 26.0-29.0); and obese (BMI > 29.0).

Trends in prevalence of prepregnancy overweight and underweight*



* Underweight (BMI < 19.8); overweight (BMI \geq 26.0; includes overweight and obese).

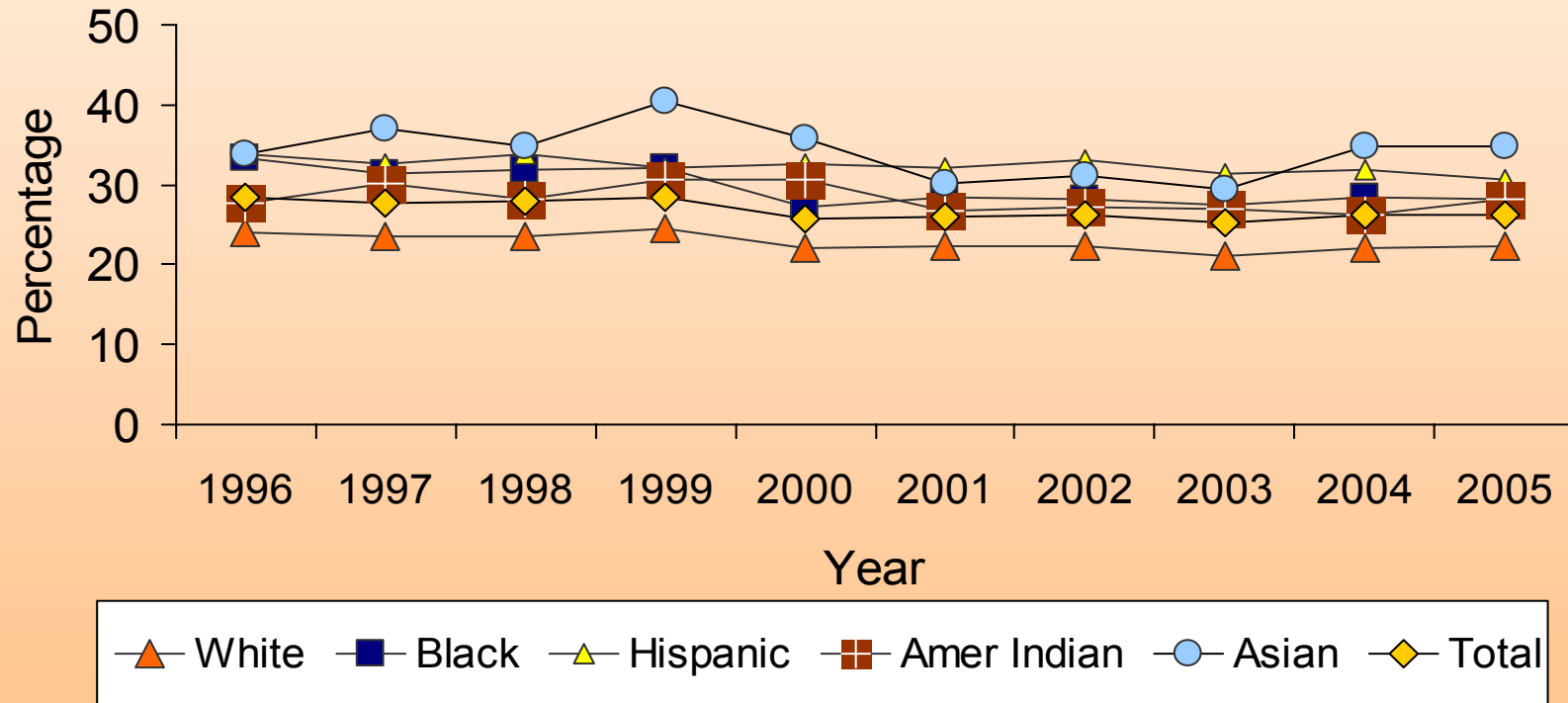
Trends in prevalence of less than ideal and greater than ideal weight gain*



* *Ideal weight gain: prepregnancy underweight = 28-40 pounds; prepregnancy normal weight = 25-35 pounds; prepregnancy overweight and obese = 15-25 pounds.*

Trends in the prevalence of less than ideal maternal weight gain*

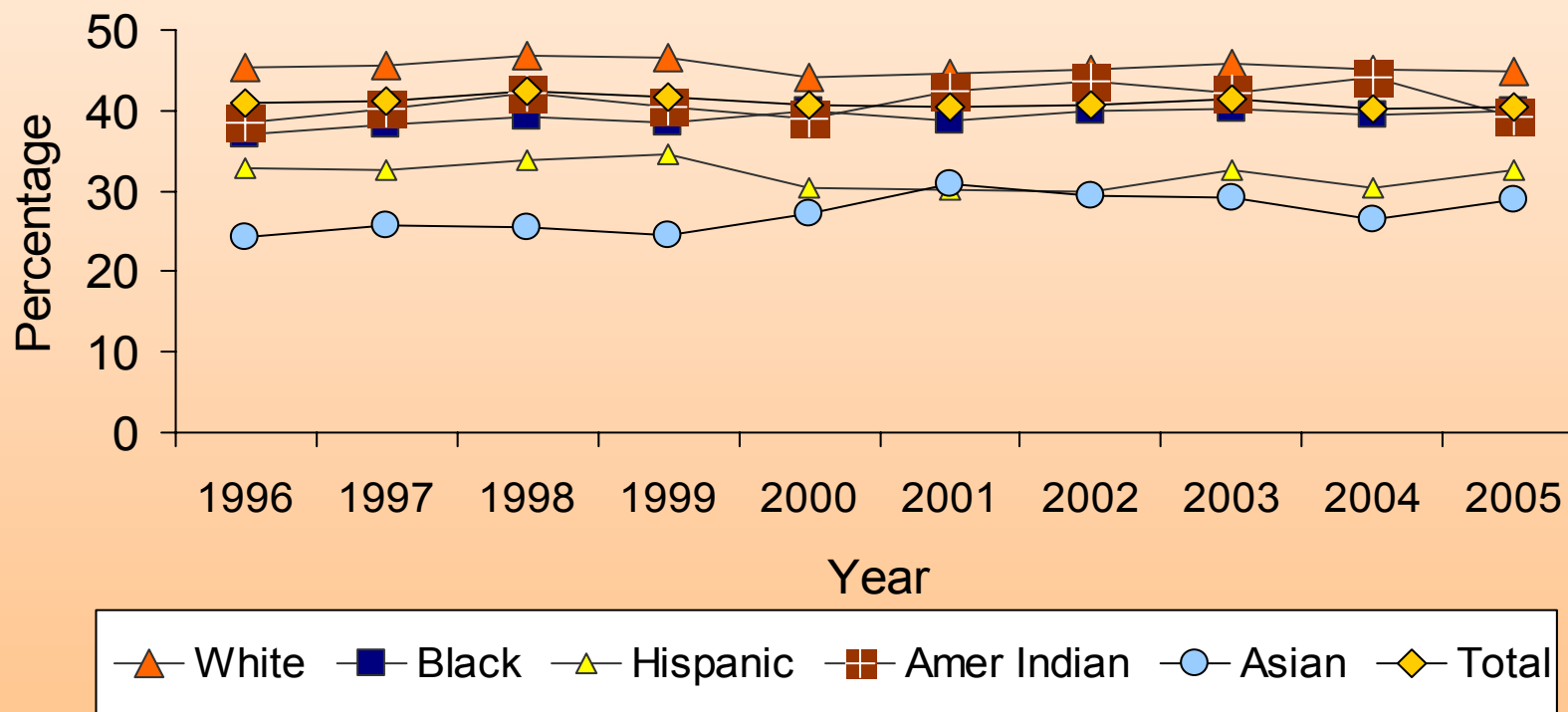
by race and ethnicity



* Ideal weight gain: prepregnancy underweight = 28-40 pounds; prepregnancy normal weight = 25-35 pounds; prepregnancy overweight and obese = 15-25 pounds.

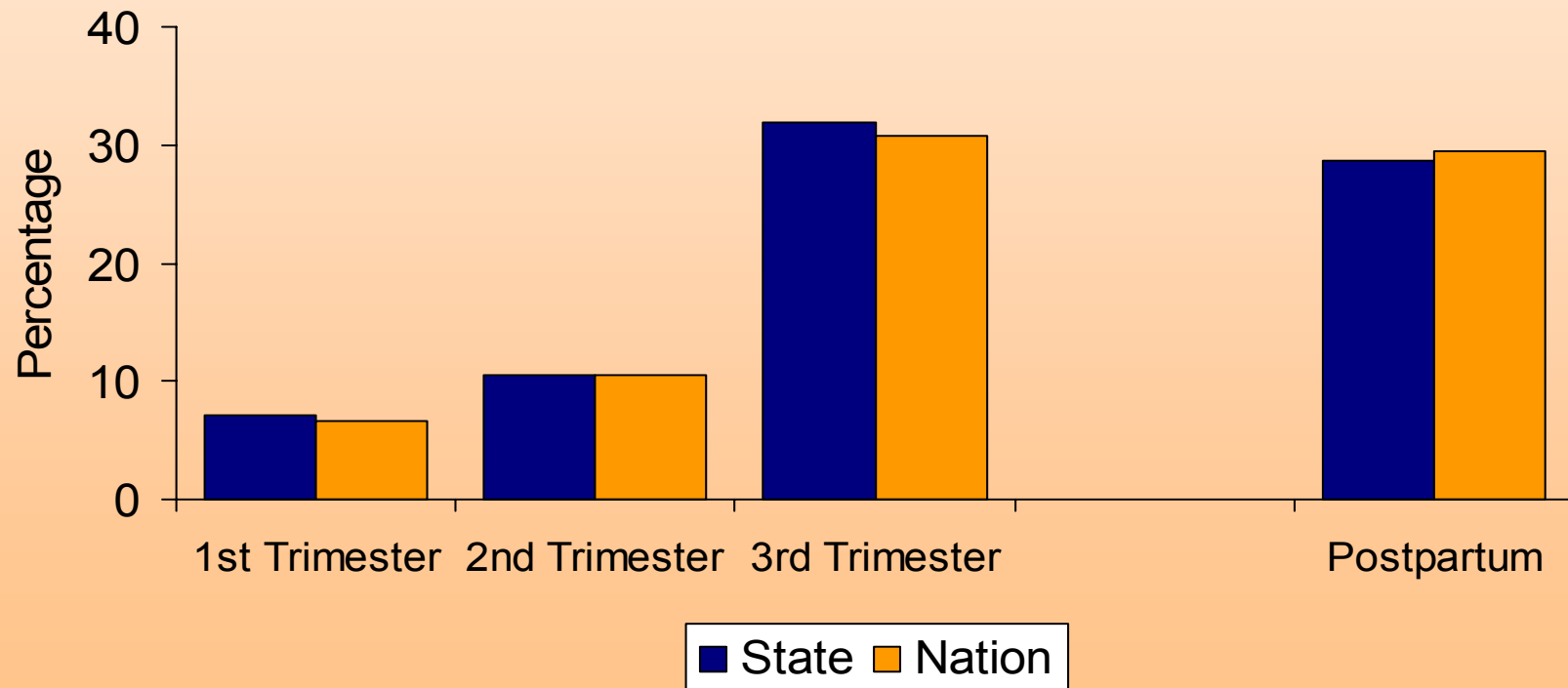
Trends in the prevalence of greater than ideal maternal weight gain*

by race and ethnicity



* Ideal weight gain: prepregnancy underweight = 28-40 pounds; prepregnancy normal weight = 25-35 pounds; prepregnancy overweight and obese = 15-25 pounds.

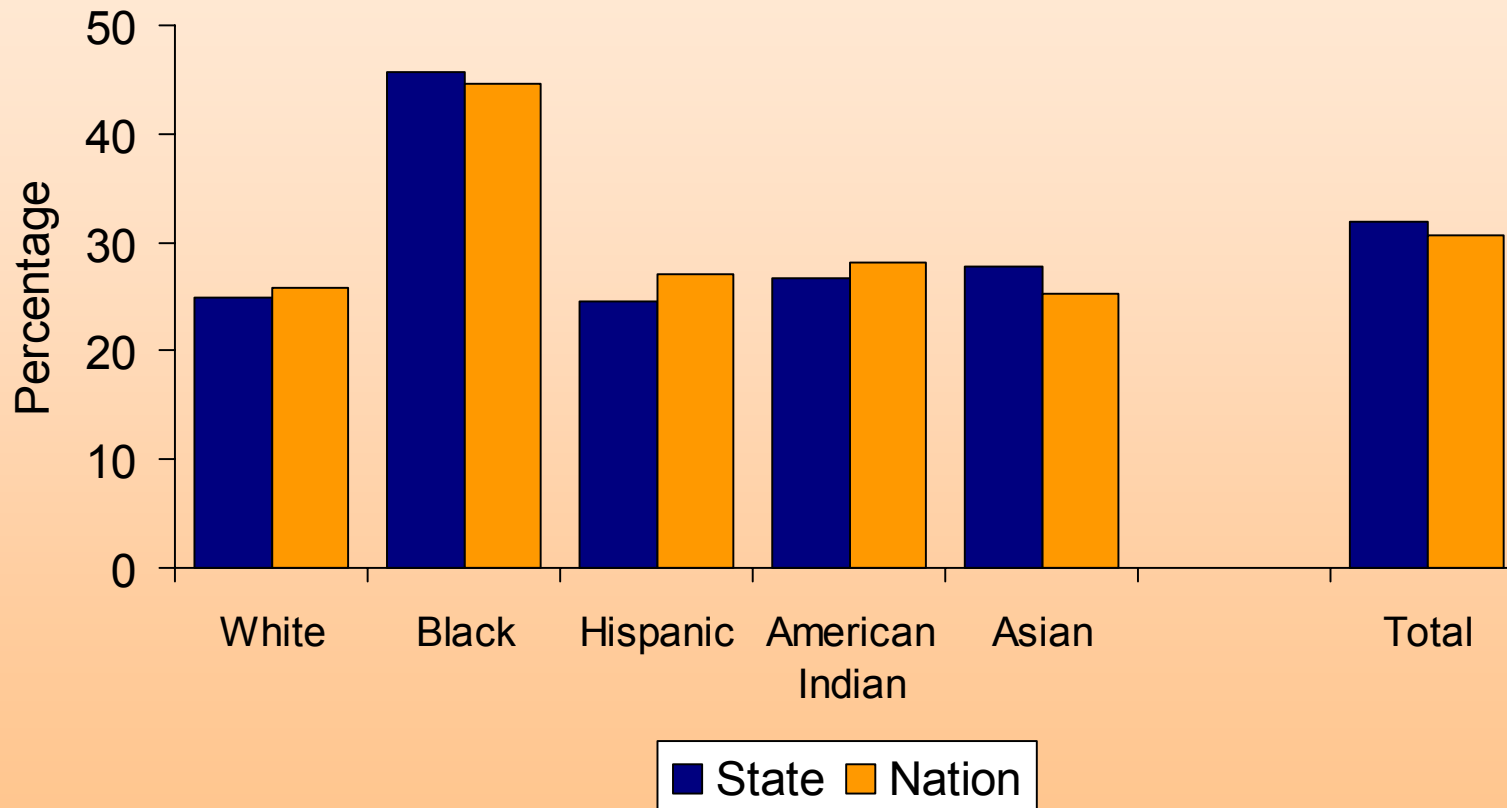
Prevalence of anemia* by timing of program enrollment



* Hb or Hct < 5th percentile, CDC MMWR vol. 47 (No. RR-3), 1998.

Prevalence of third-trimester anemia*

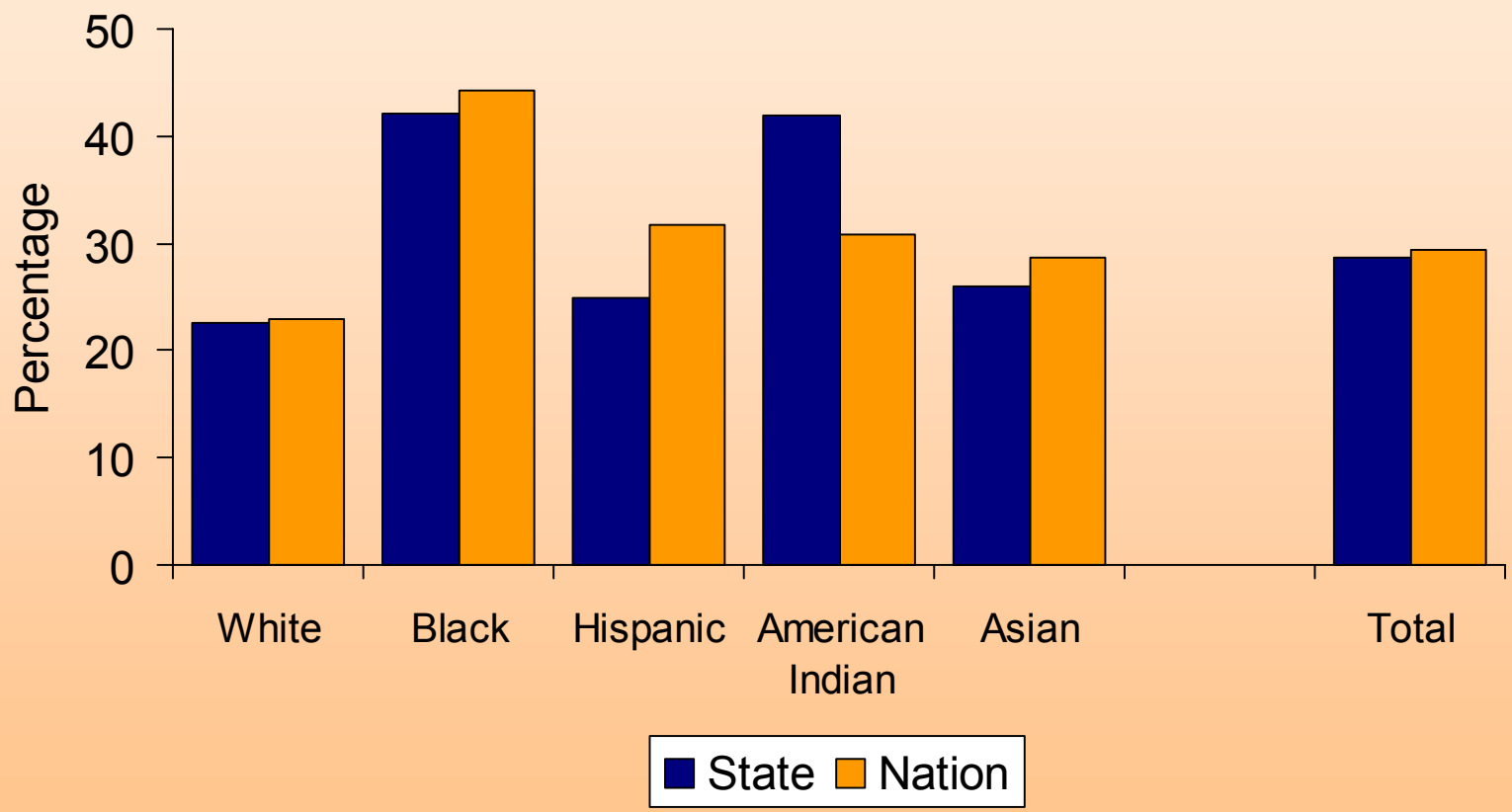
by race and ethnicity



* Hb or Hct < 5th percentile, CDC MMWR vol. 47 (No. RR-3), 1998.

Prevalence of postpartum anemia*

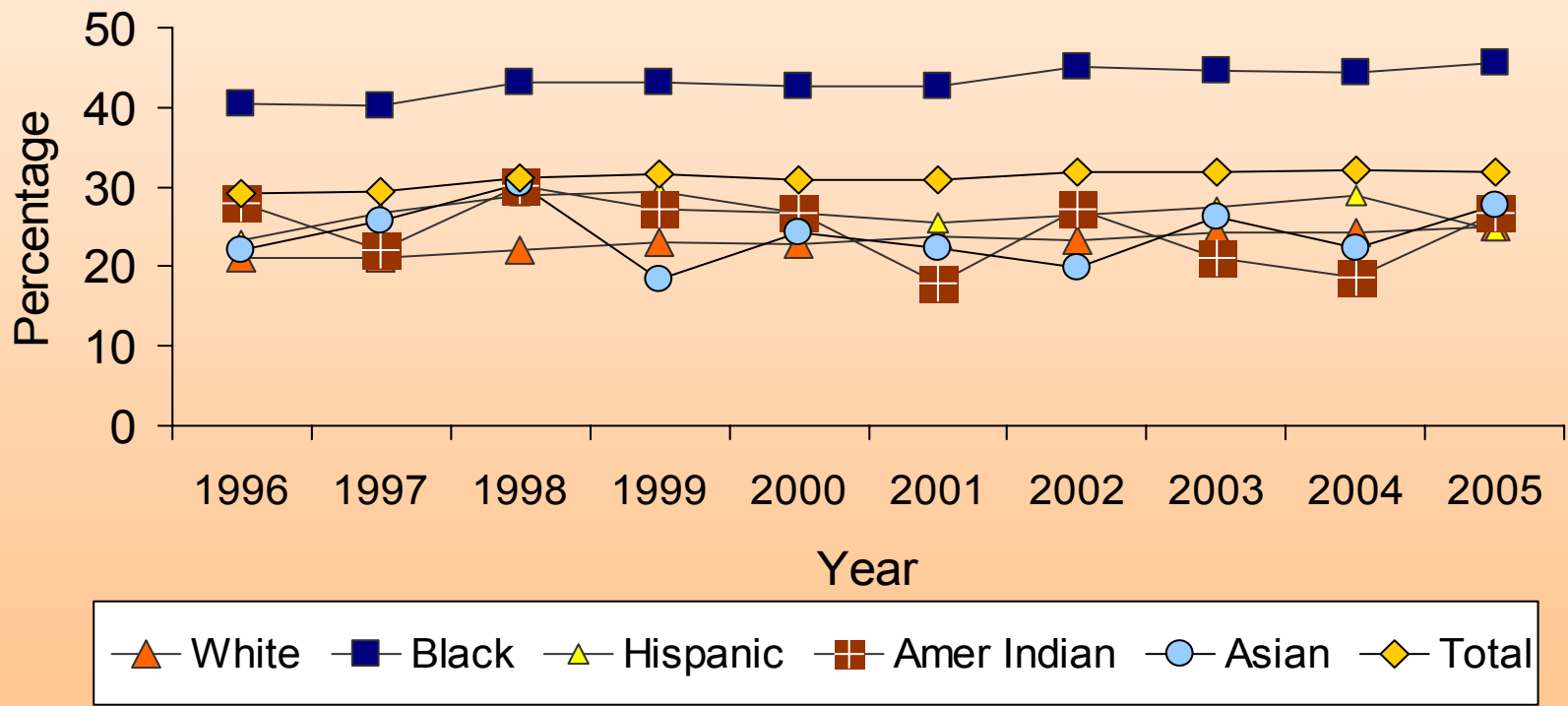
by race and ethnicity



* Hb or Hct < 5th percentile, CDC MMWR vol. 47 (No. RR-3), 1998.

Trends in prevalence of third trimester anemia*

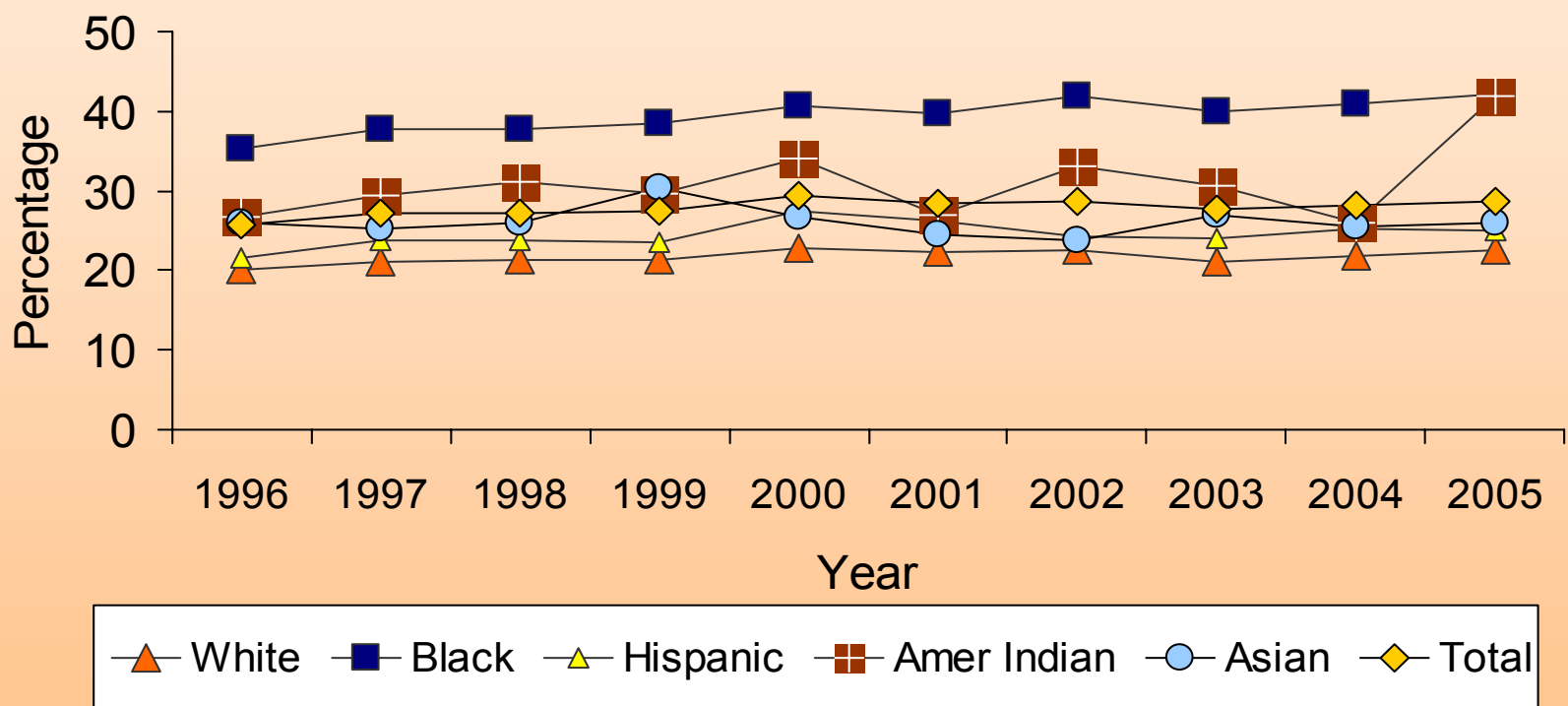
by race and ethnicity



* Hb or Hct < 5th percentile, CDC MMWR vol. 47 (No. RR-3), 1998.

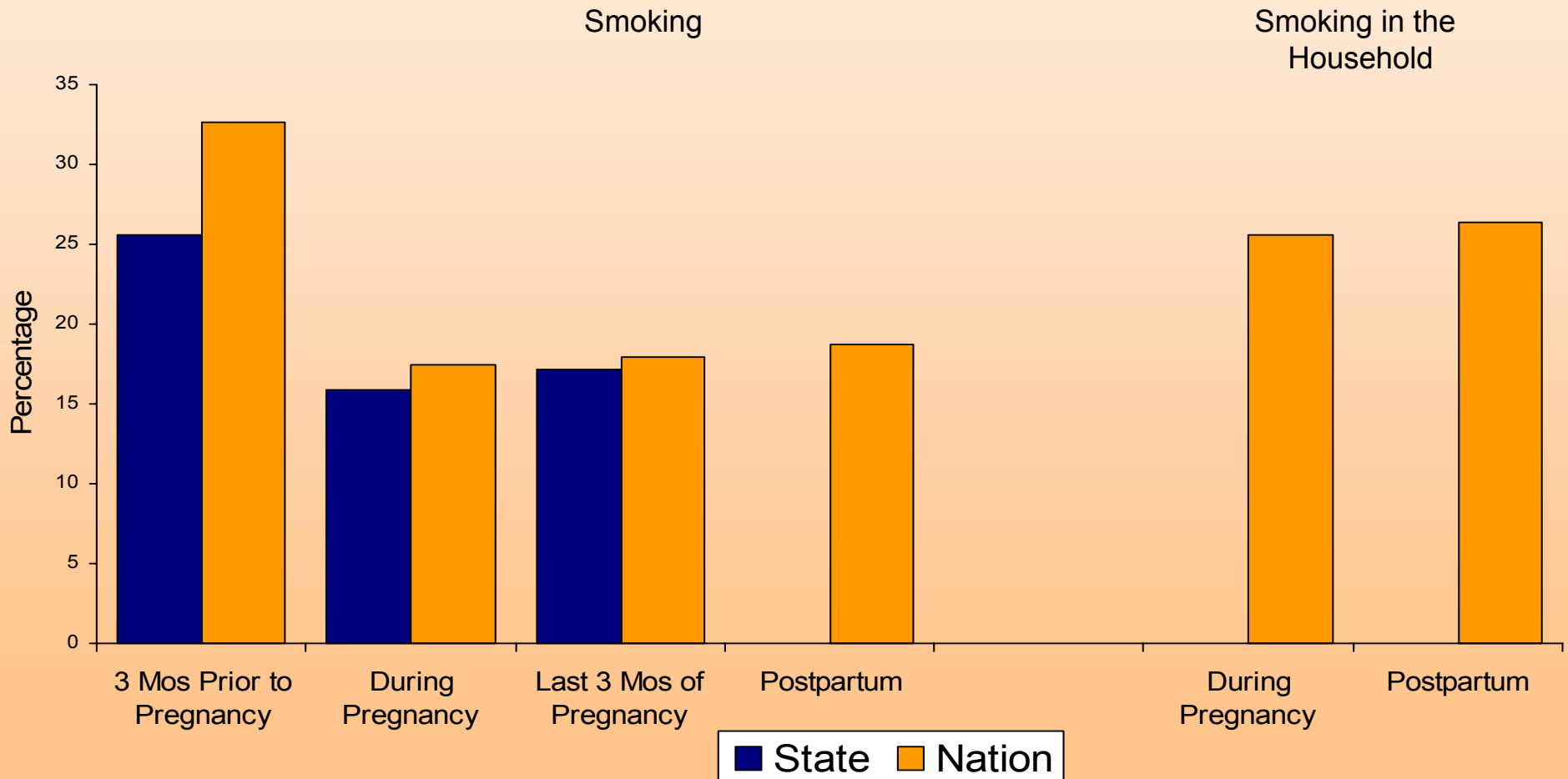
Trends in the prevalence of postpartum anemia*

by race and ethnicity



* Hb or Hct < 5th percentile, CDC MMWR vol. 47 (No. RR-3), 1998.

Prevalence of smoking and smoking in the household by pregnancy status

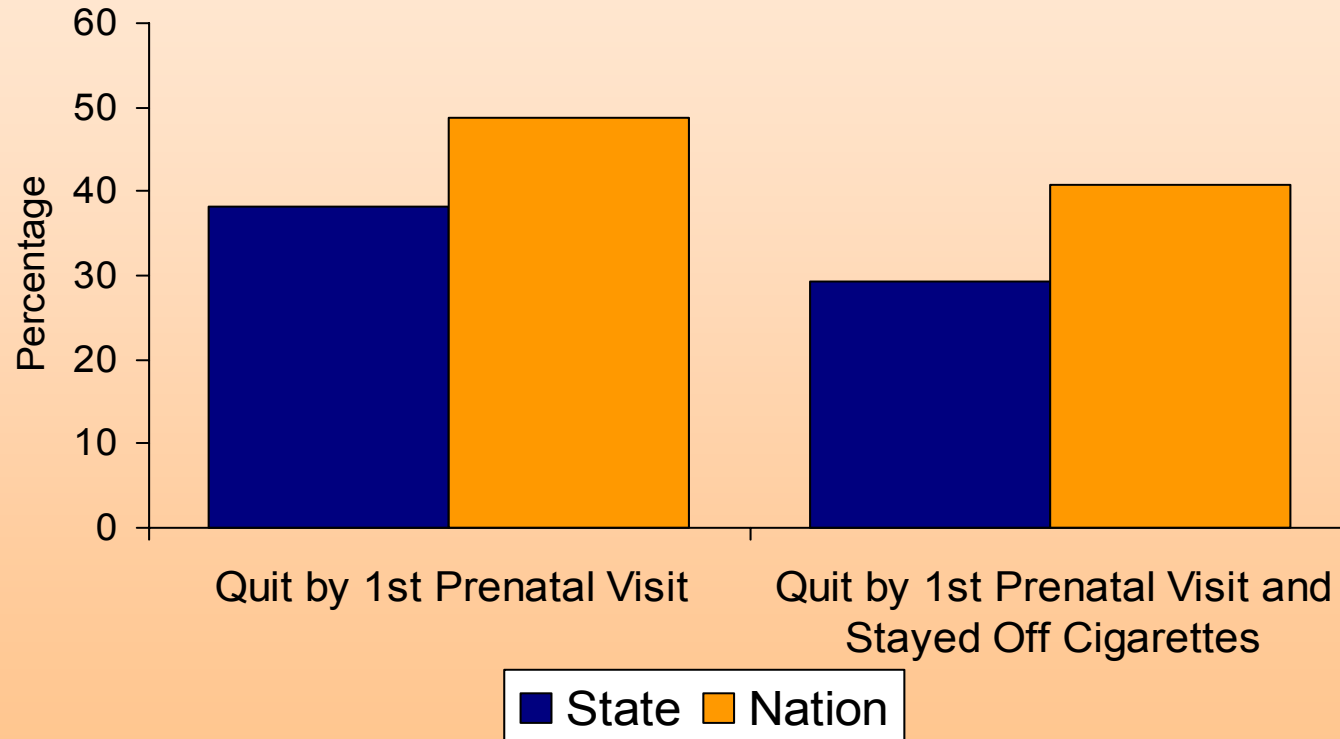


Year 2010 target: 99% of pregnant women report no smoking in the past month.

2005 NC PNSS Table 2C

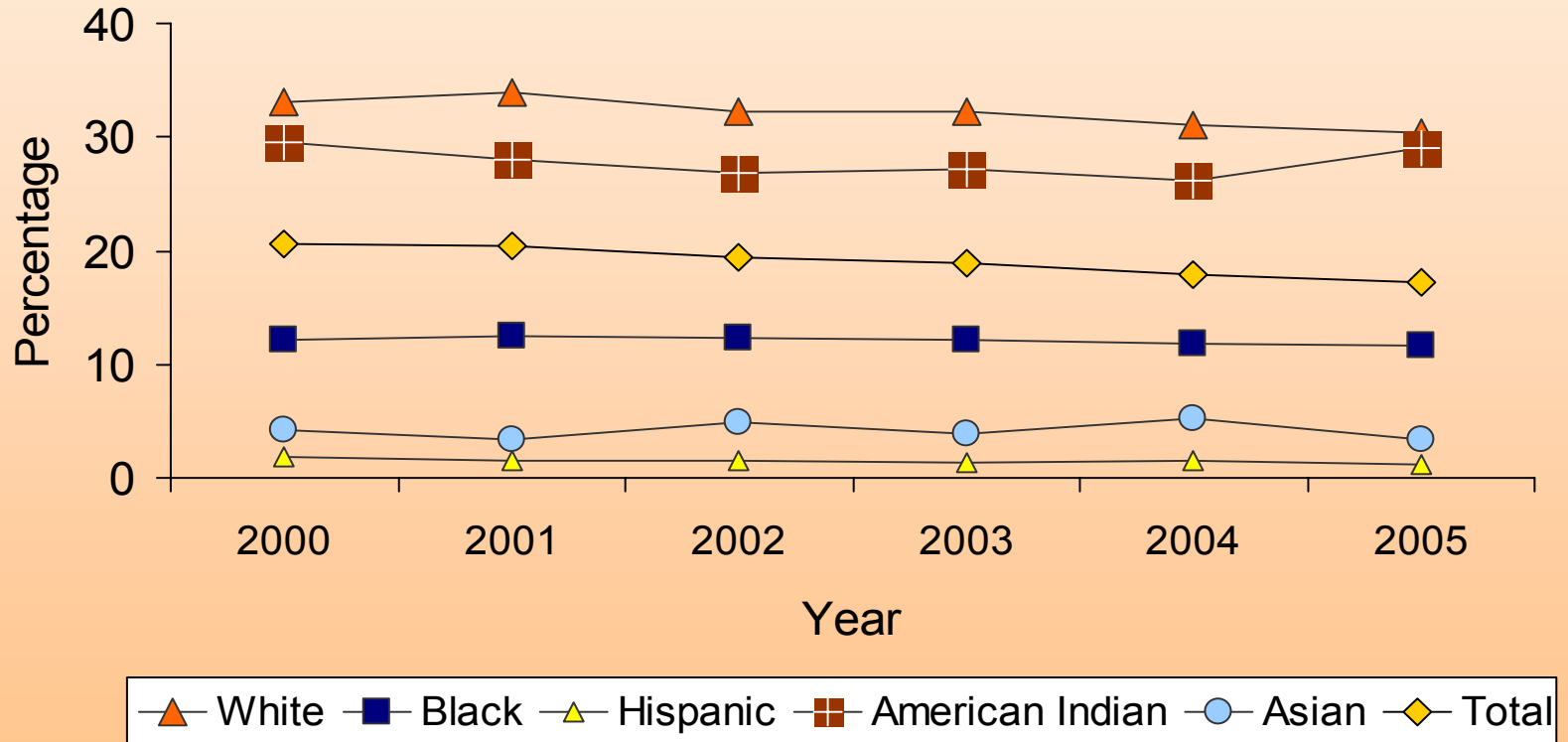
Smoking changes during pregnancy

among women who reported smoking three months prior to pregnancy

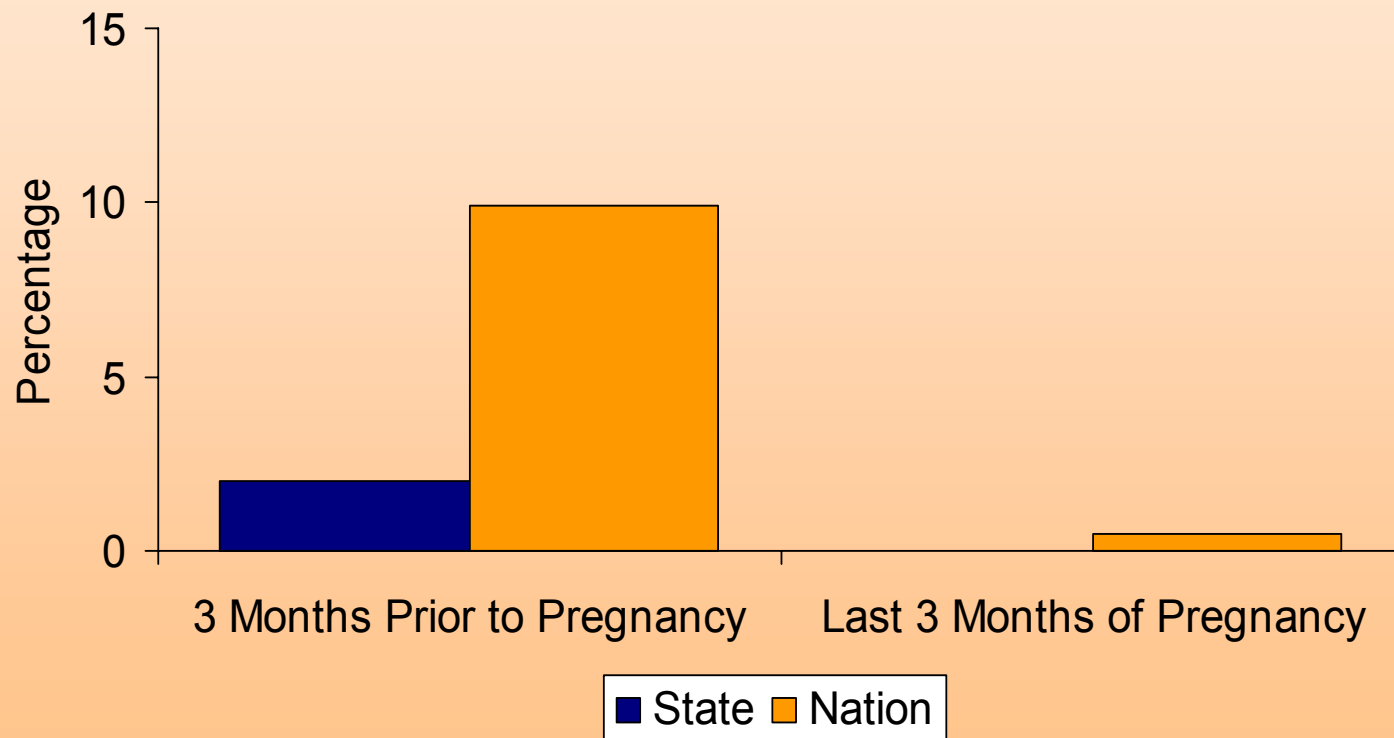


Trends in prevalence of smoking during the last 3 months of pregnancy

by race and ethnicity



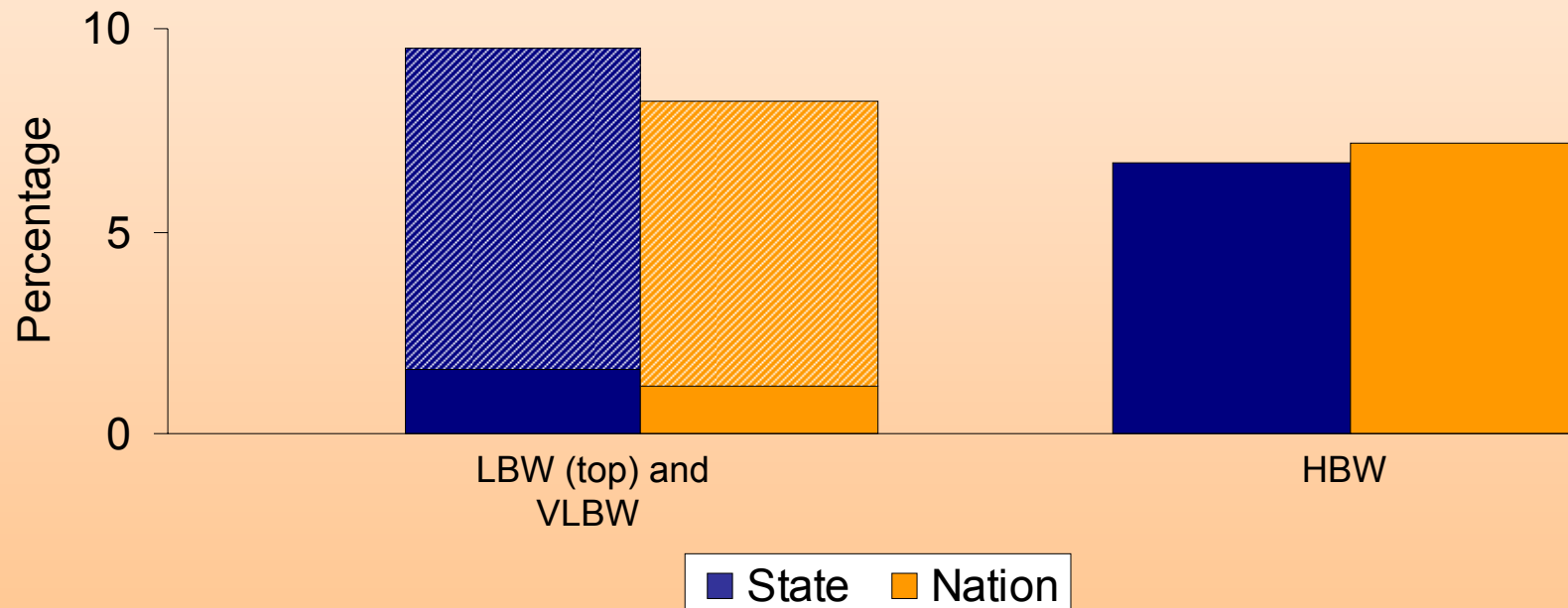
Prevalence of maternal drinking



Year 2010 Target: 6% or less of pregnant women report use of alcohol in the previous month.

2005 NC PNSS Table 2C

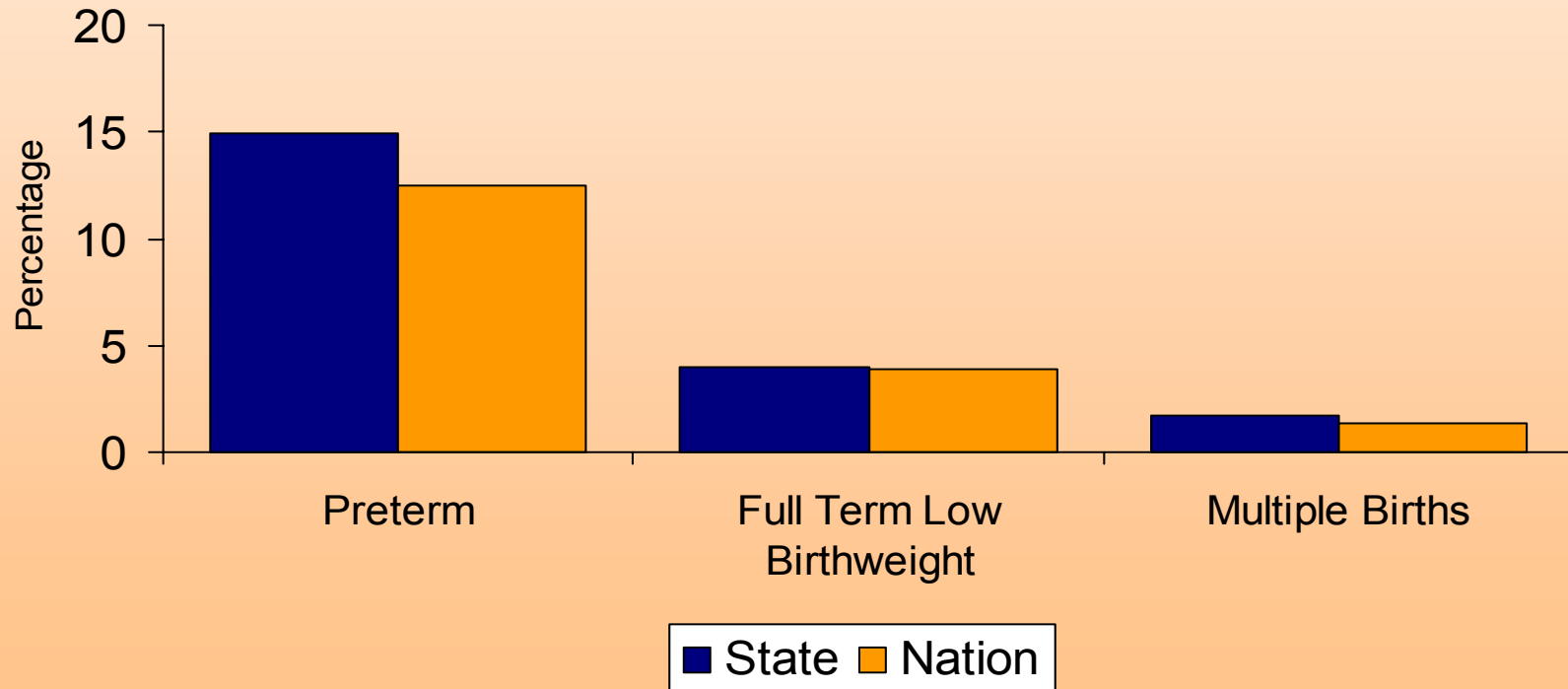
Prevalence of low birthweight and high birthweight *



* VLBW < 1500 g; LBW = 1500 - < 2500 g; HBW > 4000 g.

** Year 2010 Target: Reduce very low birthweight to < 0.9 percent and low birthweight to < 5.0 percent

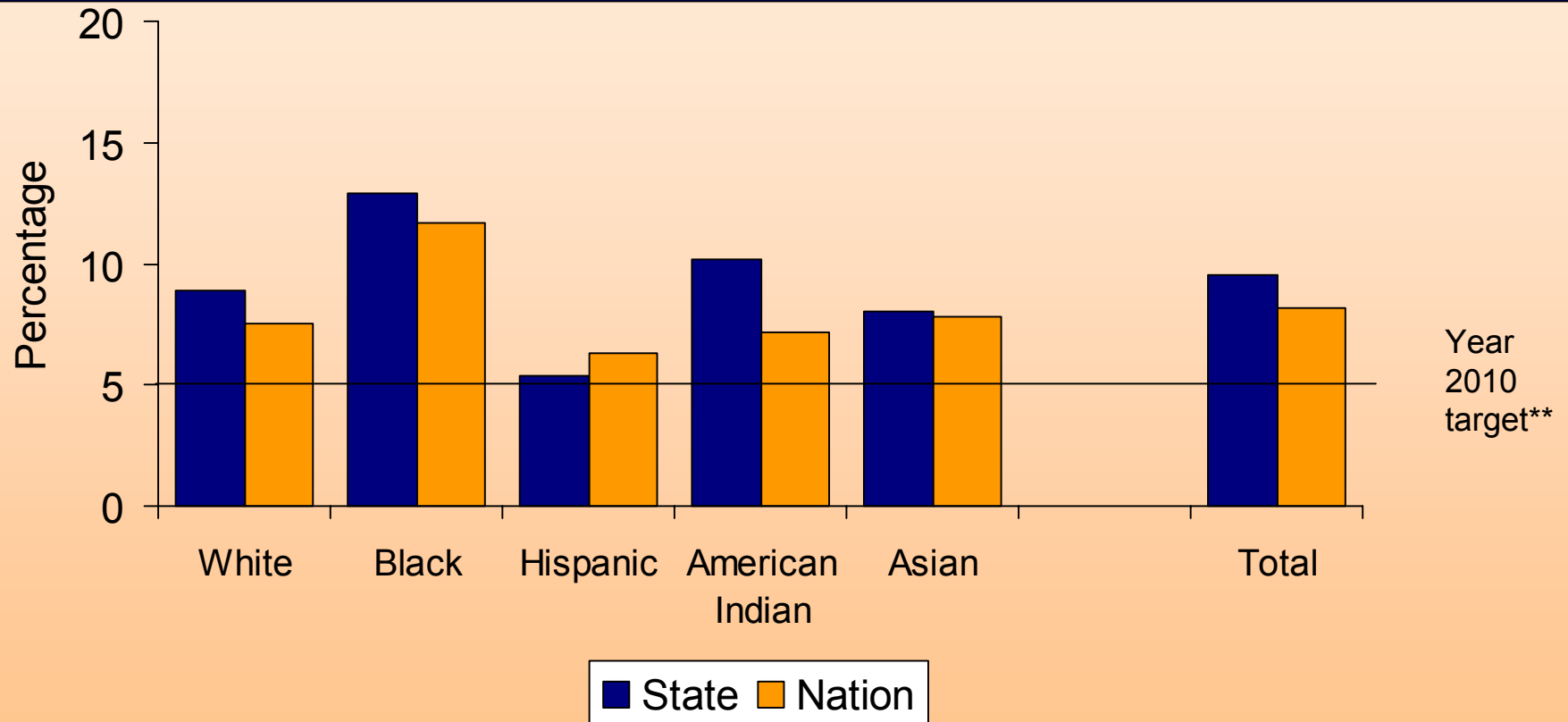
Prevalence of selected birth outcomes*



* Preterm: < 37 weeks gestation. Full term low birthweight: 37 or more weeks and < 2500 g.

Prevalence of low birthweight*

by race and ethnicity

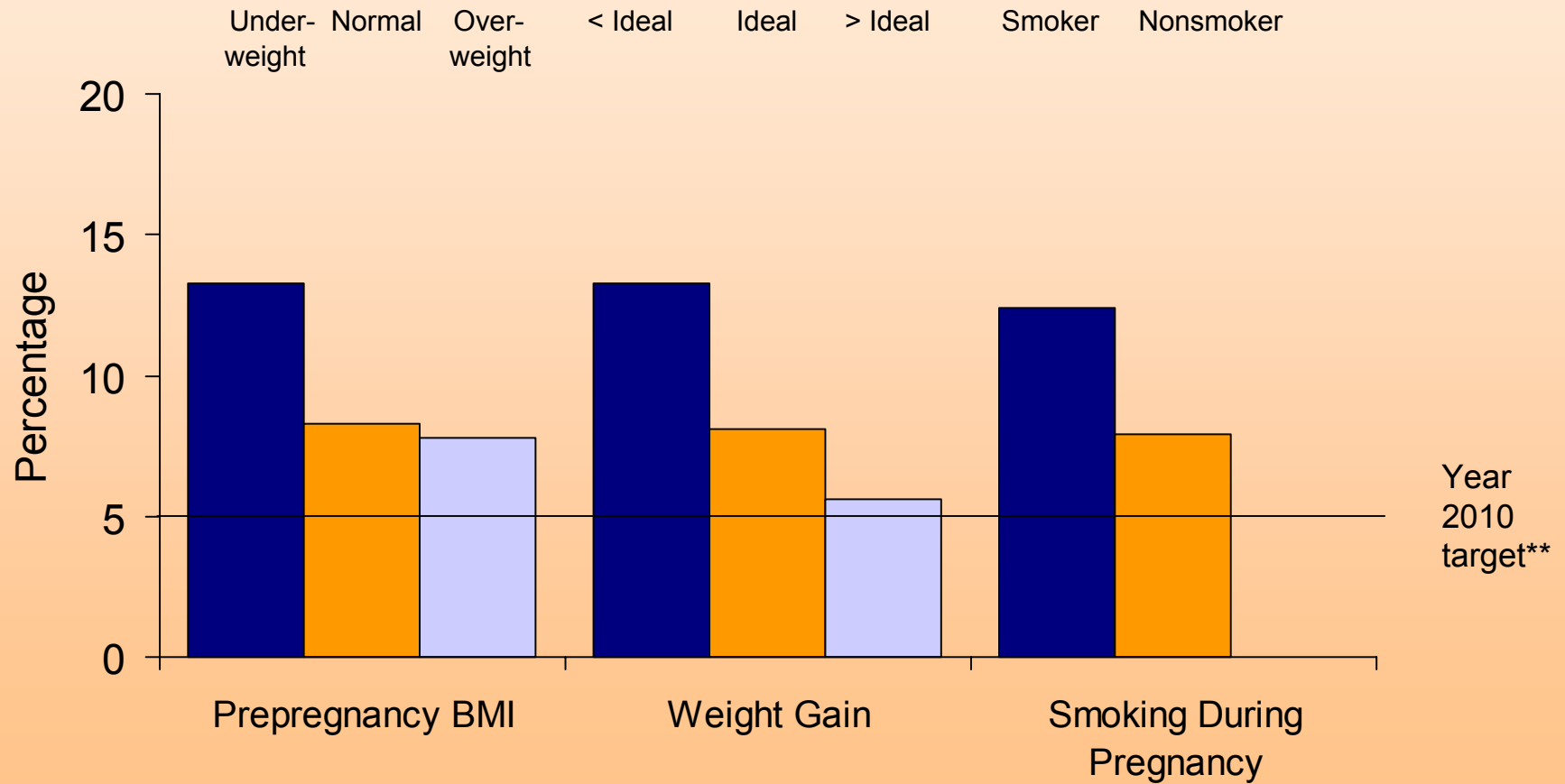


* Low birthweight includes VLBW < 1500 g and LBW = 1500-<2500 g.

** Year 2010 target: Reduce low birthweight to < 5.0 percent.

Prevalence of low birthweight*

by selected health indicators

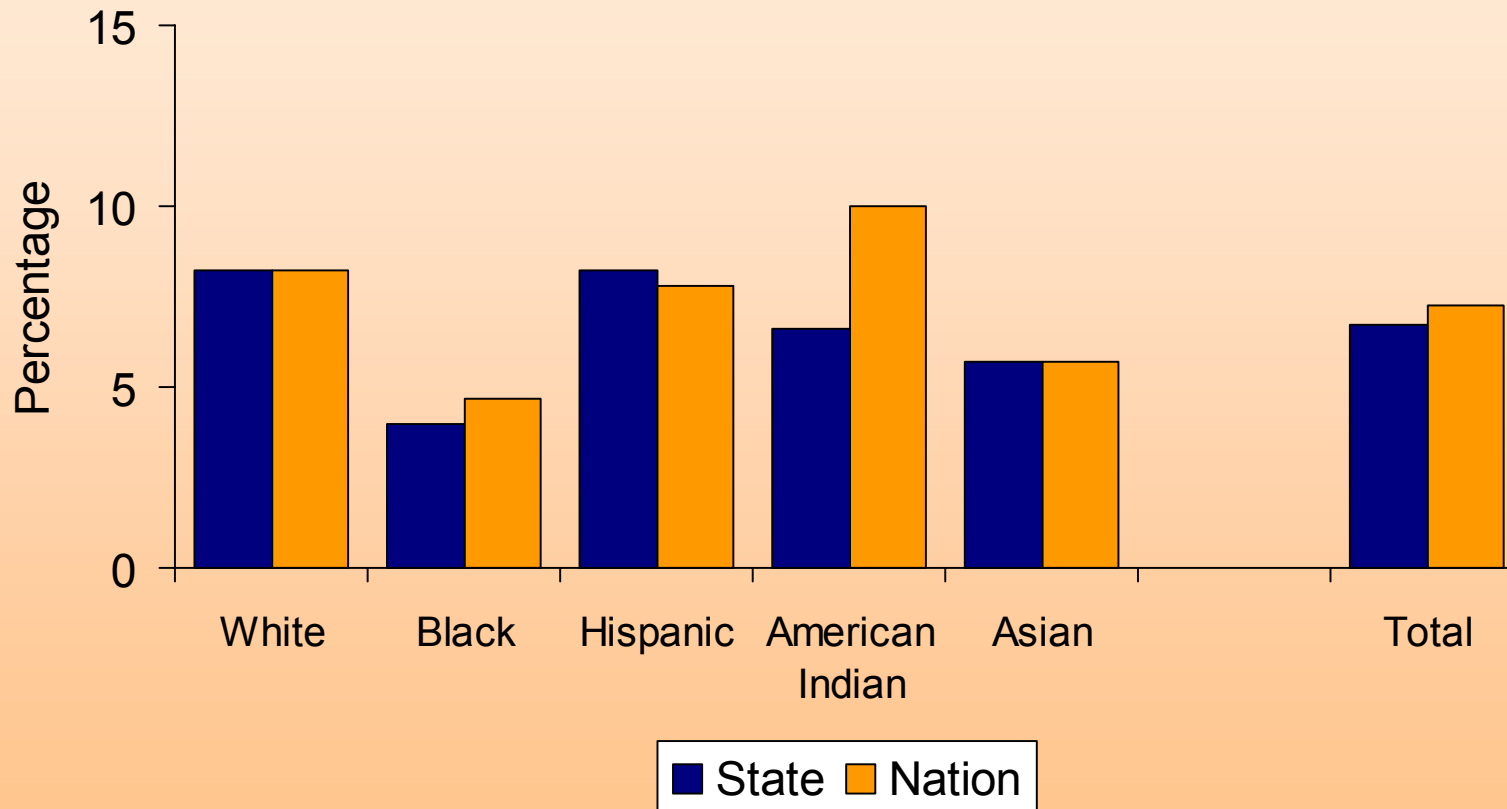


* Low birthweight includes VLBW < 1500 g and LBW = 1500-<2500 g.

** Year 2010 target: Reduce low birthweight to < 5.0 percent.

Prevalence of high birthweight*

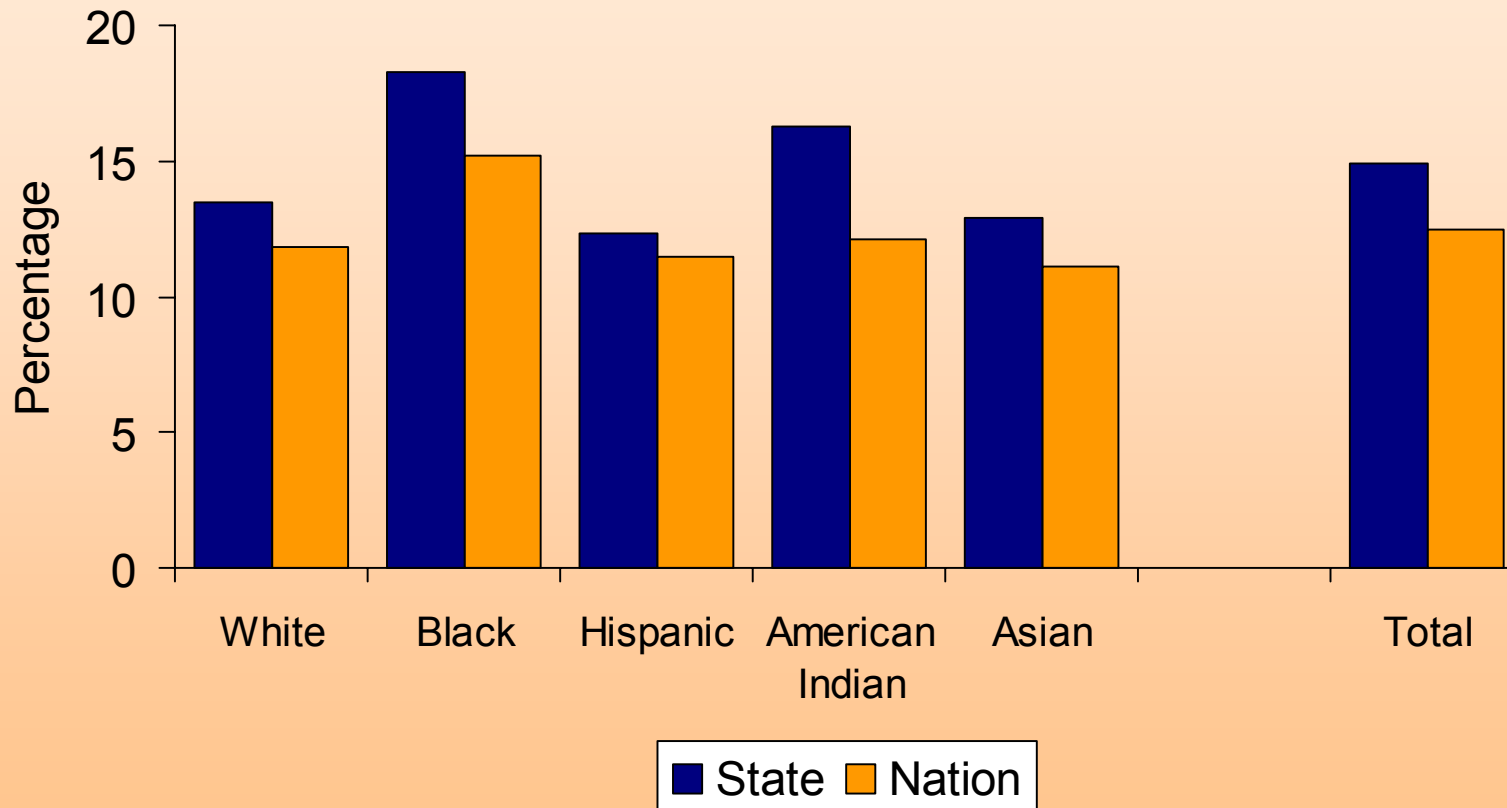
by race and ethnicity



* High birthweight > 4000 g.

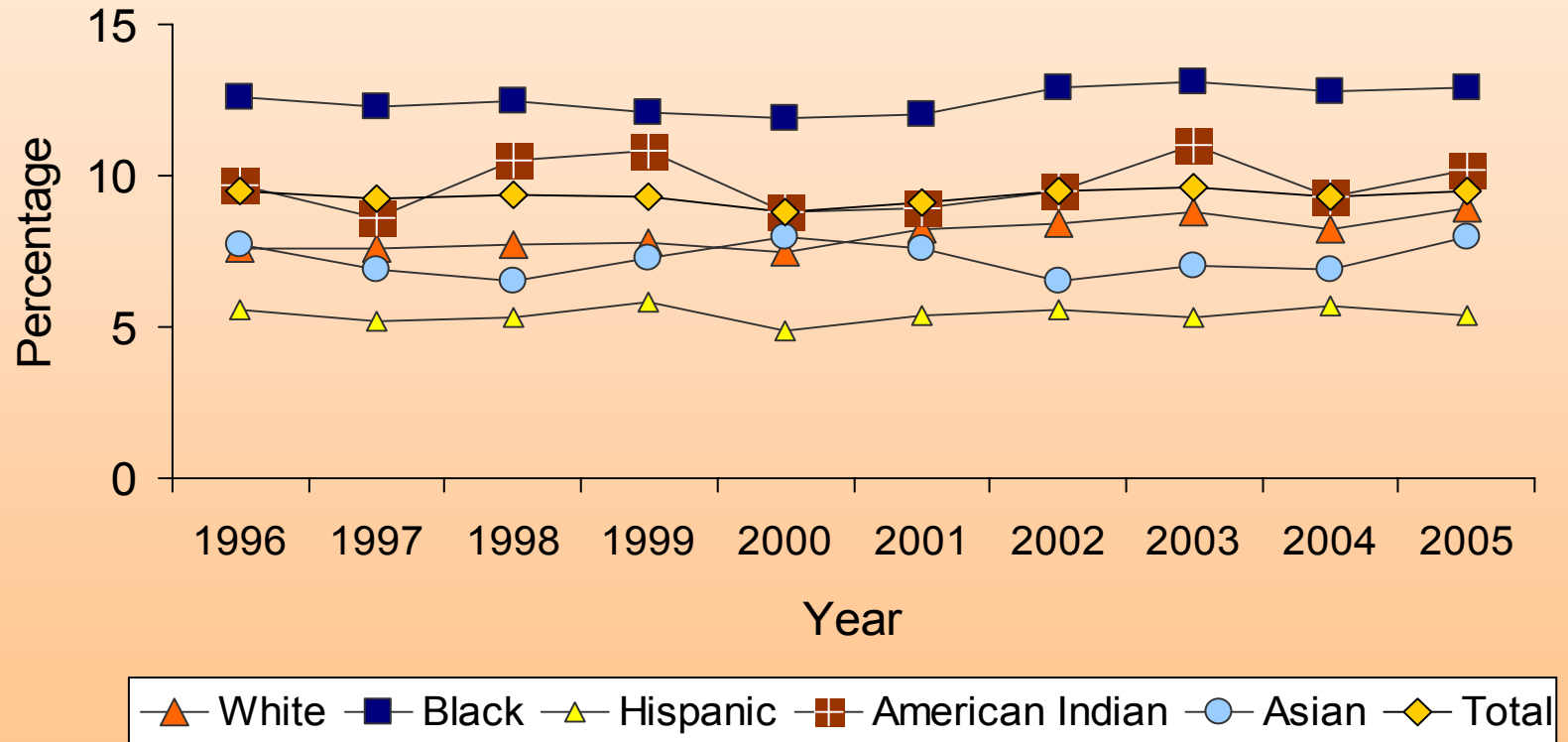
Prevalence of preterm delivery*

by race and ethnicity



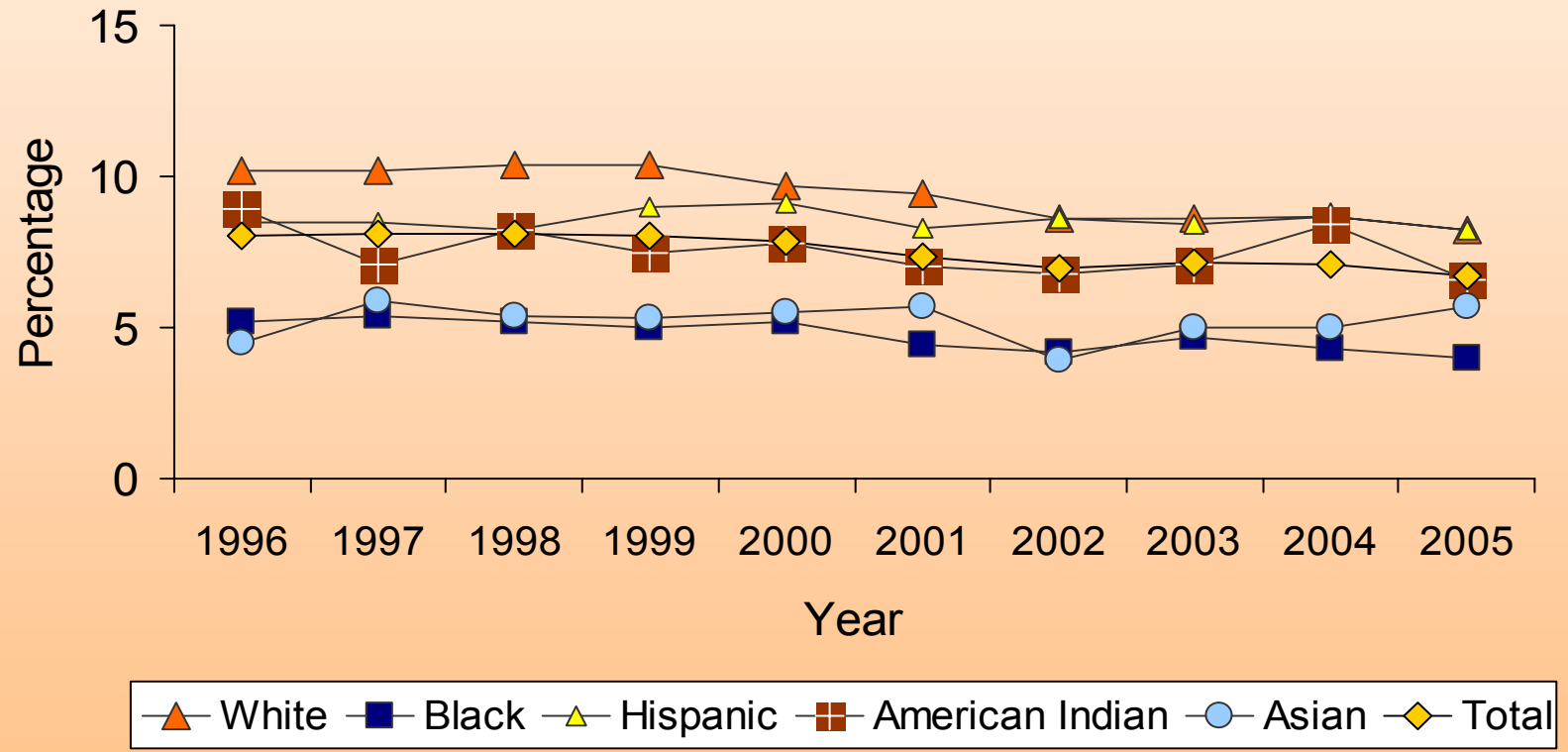
* Preterm: < 37 weeks gestation.

Trends in the prevalence of low birthweight* by race and ethnicity



* < 2500 g.

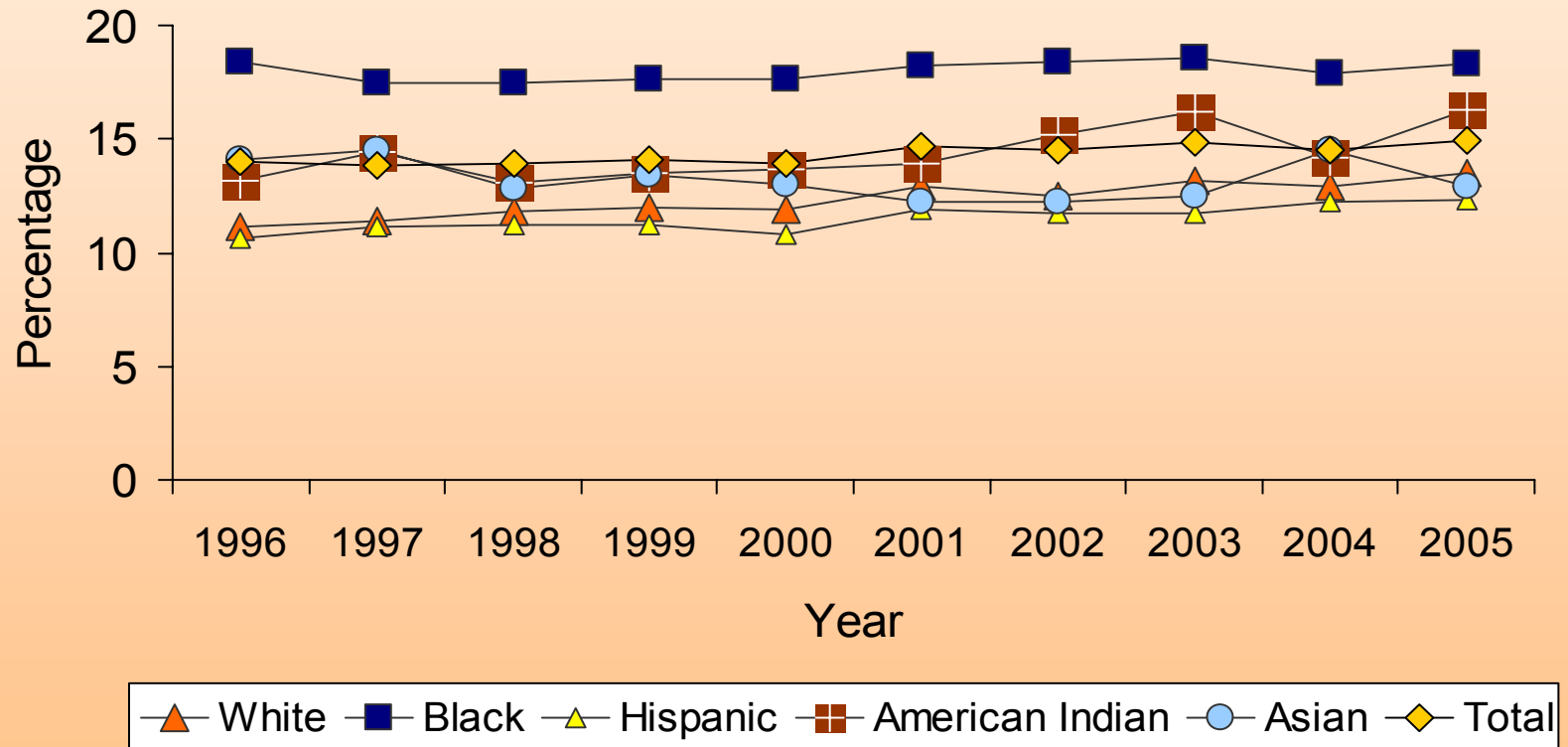
Trends in the prevalence of high birthweight* by race and ethnicity



* > 4000 g.

Trends in the prevalence of preterm delivery*

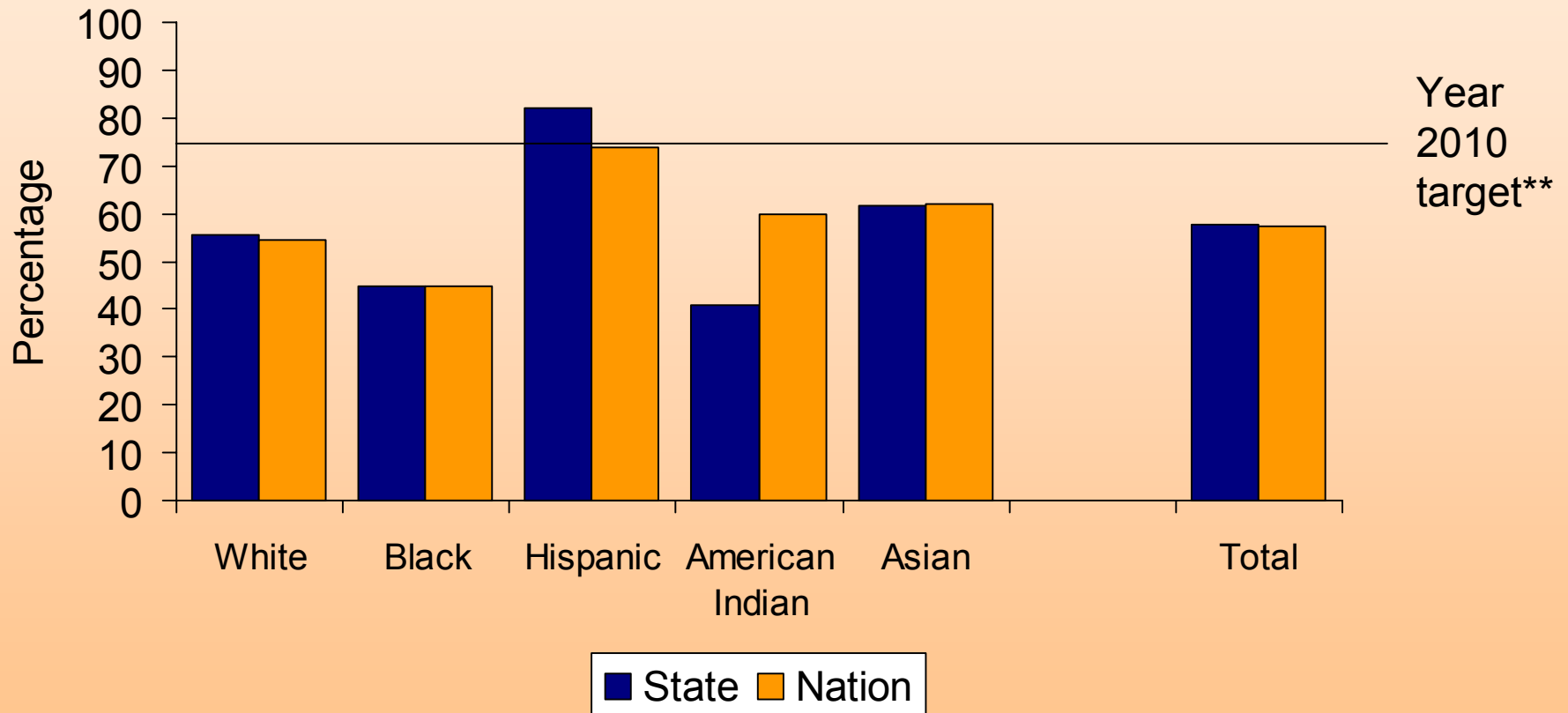
by race and ethnicity



* < 37 weeks gestation.

Percentage of infants ever breastfed*

by race and ethnicity

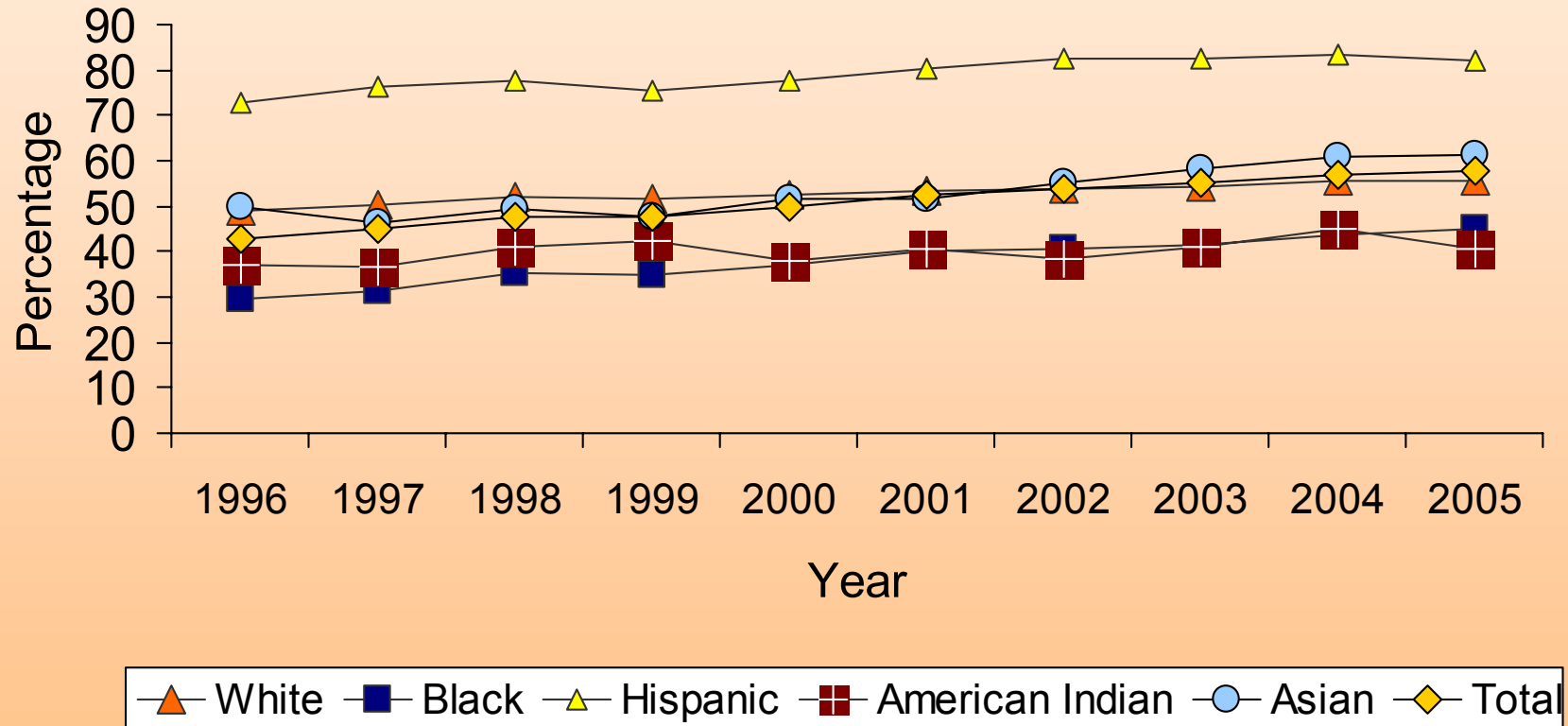


* Includes infants currently breastfeeding or ever breastfed as reported by mother at postpartum visit .

** Year 2010 Target: Increase the proportion of mothers who breastfeed their babies in the early postpartum period to 75%.

Trends in the percentage of infants ever breastfed*

by race and ethnicity



* Reported by mother at postpartum visit. Year 2010 target: increase the proportion of mothers who breastfeed their babies in the early postpartum period to 75%.

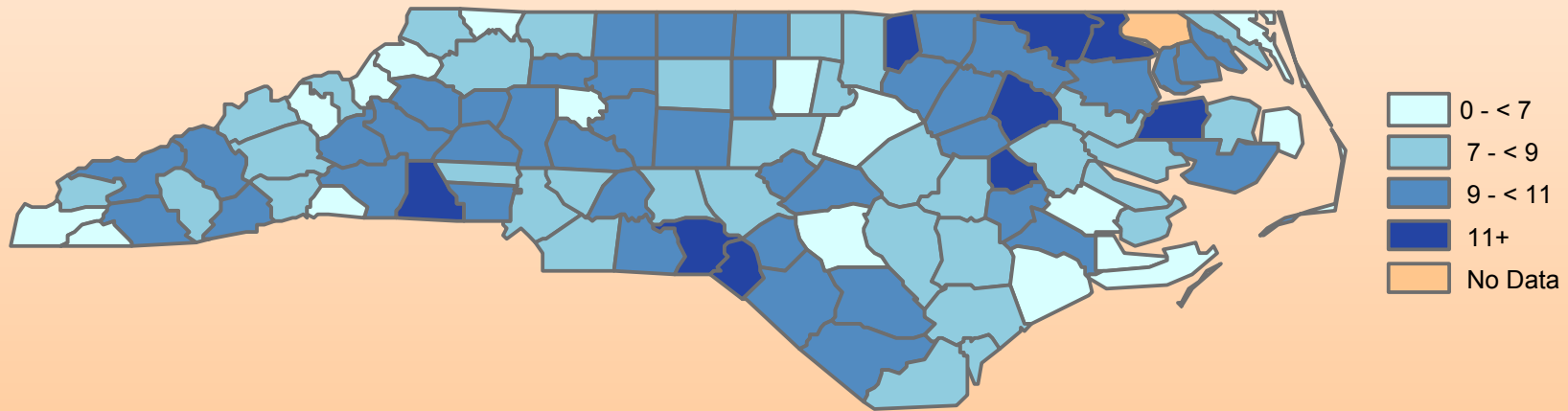
Maps

State Maps of County Data

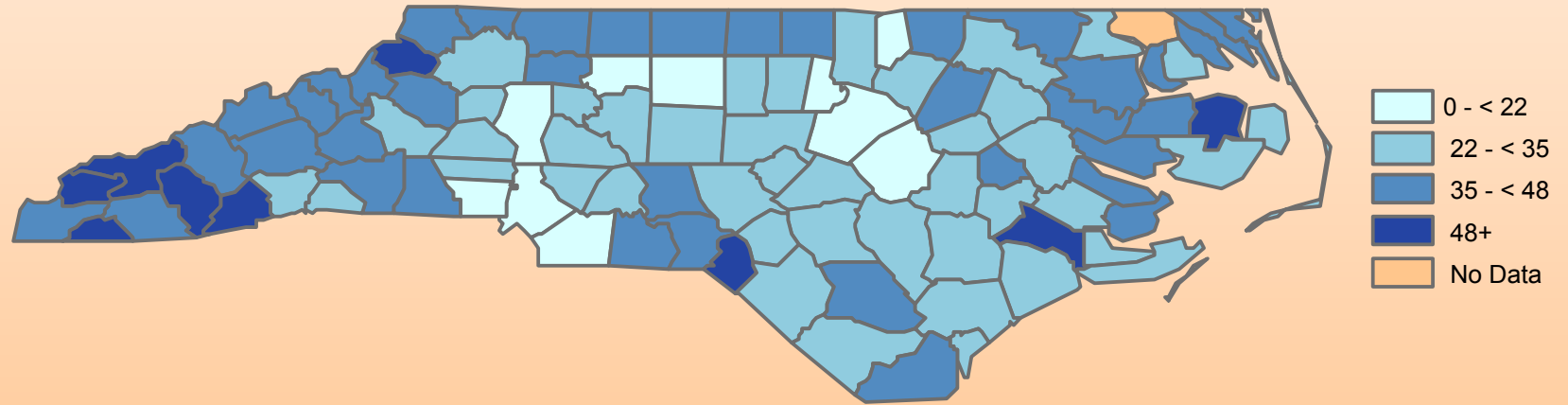
2003-2005

Pregnancy Nutrition
Surveillance System

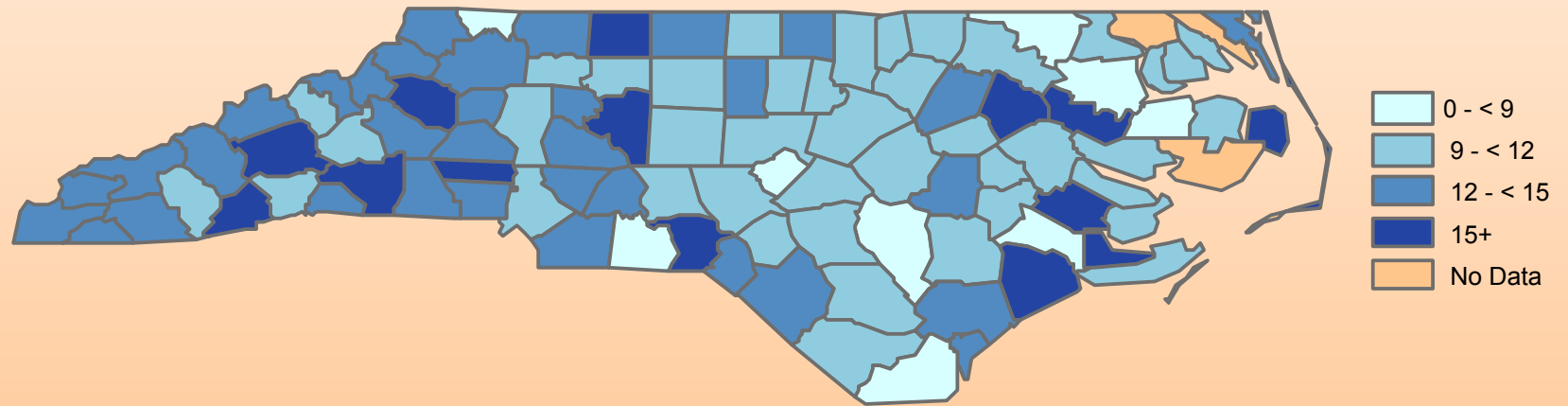
Percentage of pregnancies among females aged ≤ 17 years, by county



Percentage of women enrolling in WIC during their first trimester, by county

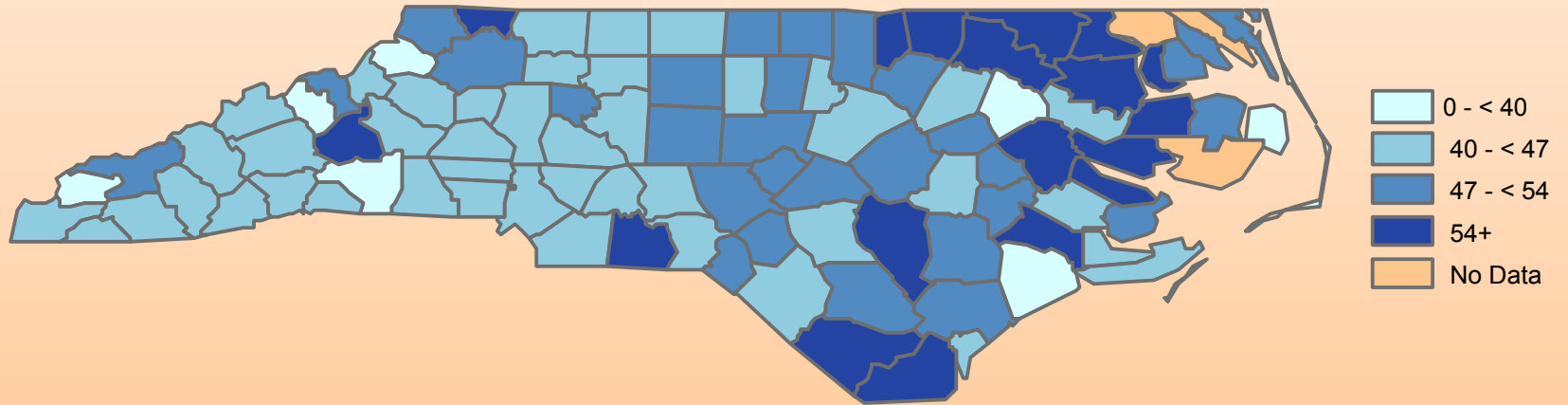


Prevalence of prepregnancy underweight*, by county



* *BMI* < 19.8.

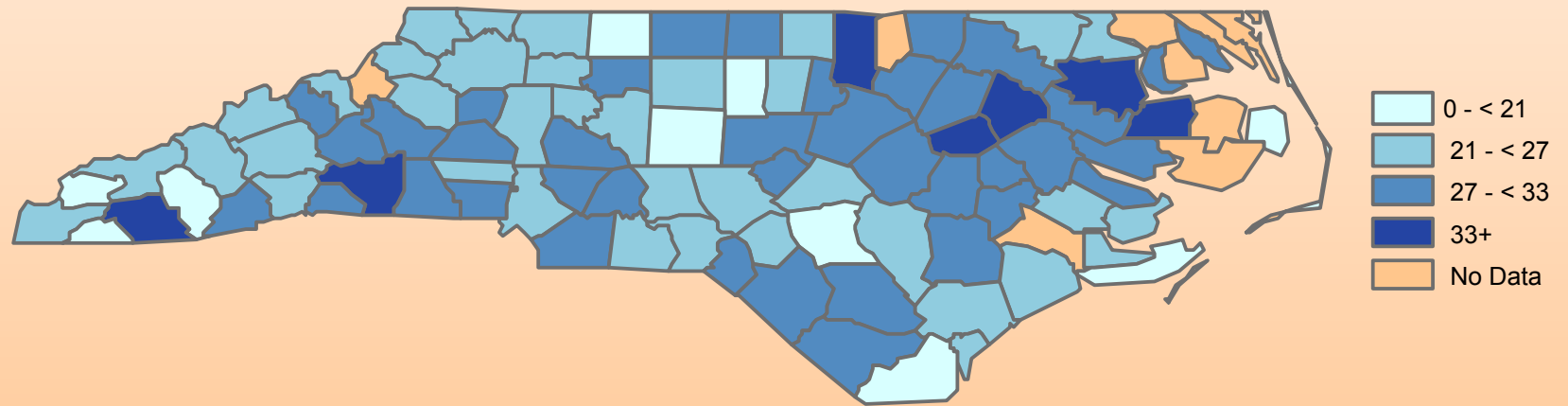
Prevalence of prepregnancy overweight*, by county



* $BMI \geq 26.0$.

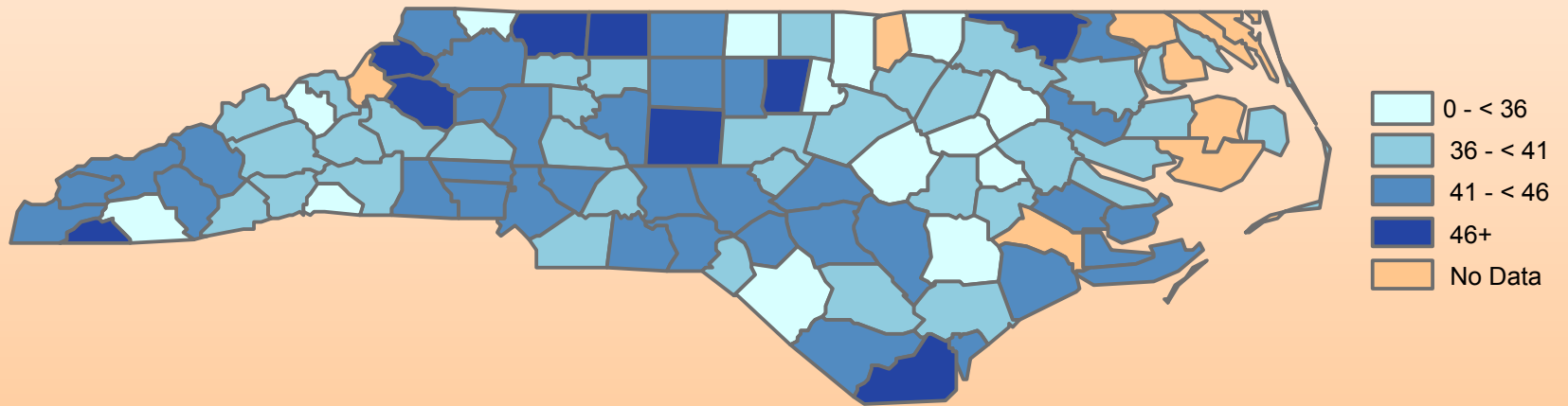
2003-2005 NC PNSS Table 5B

Prevalence of < ideal weight gain*, by county



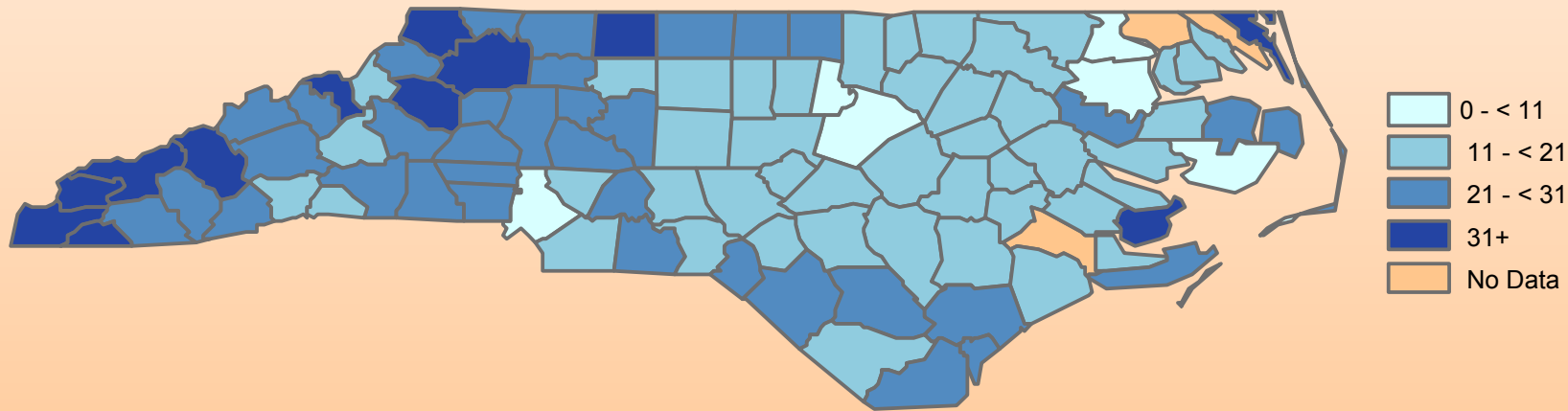
* *Ideal weight gain: prepregnancy underweight = 28-40 pounds; prepregnancy normal weight = 25-35 pounds; prepregnancy overweight and obese = 15-25 pounds.*

Prevalence of > ideal weight gain*, by county

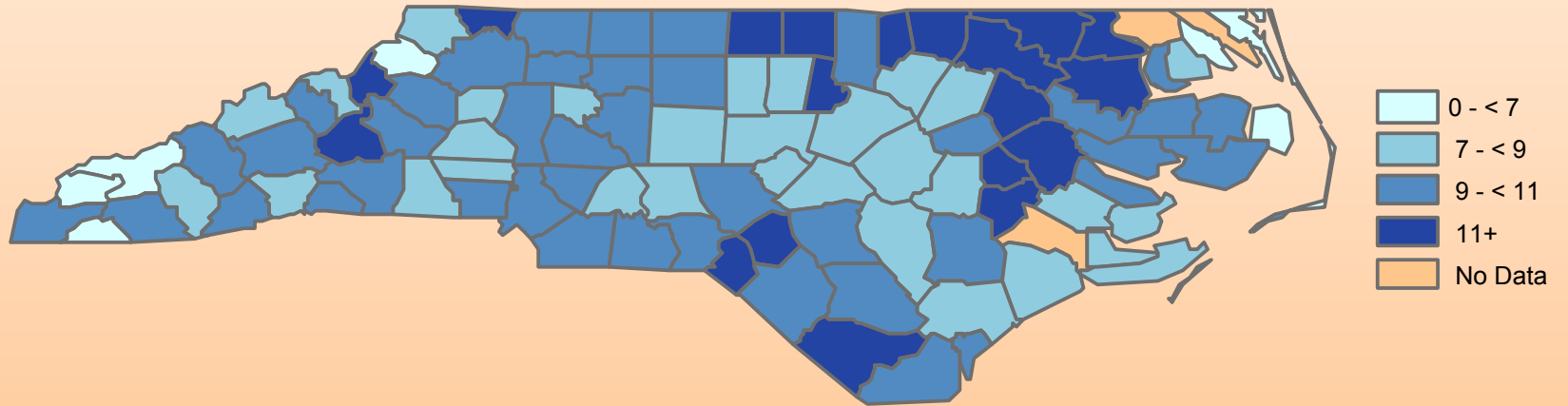


* *Ideal weight gain: prepregnancy underweight = 28-40 pounds; prepregnancy normal weight = 25-35 pounds; prepregnancy overweight and obese = 15-25 pounds.*

Prevalence of smoking during the last 3 months of pregnancy, by county

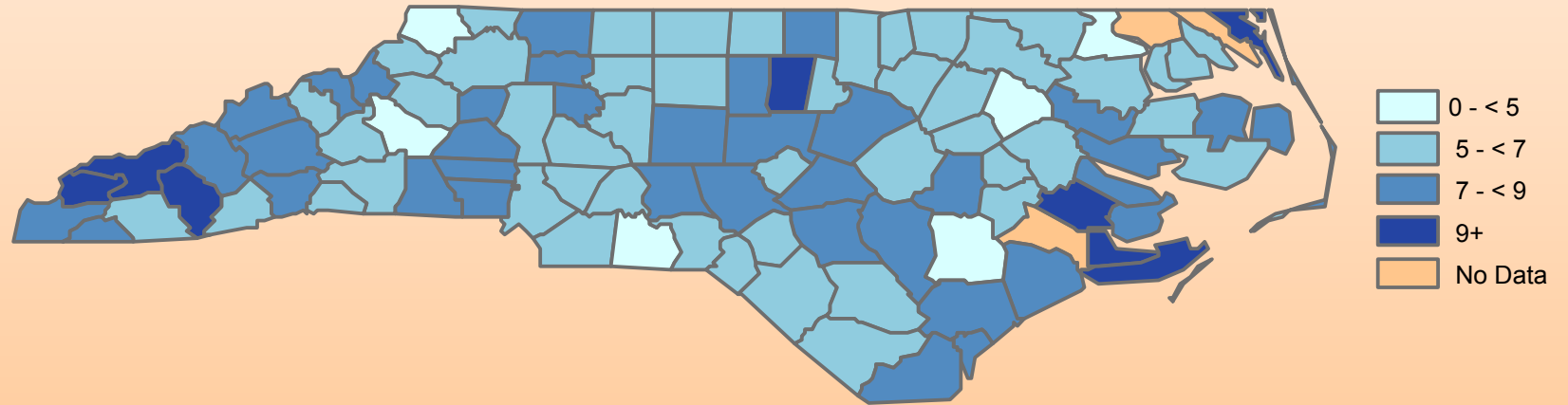


Prevalence of low birthweight*, by county



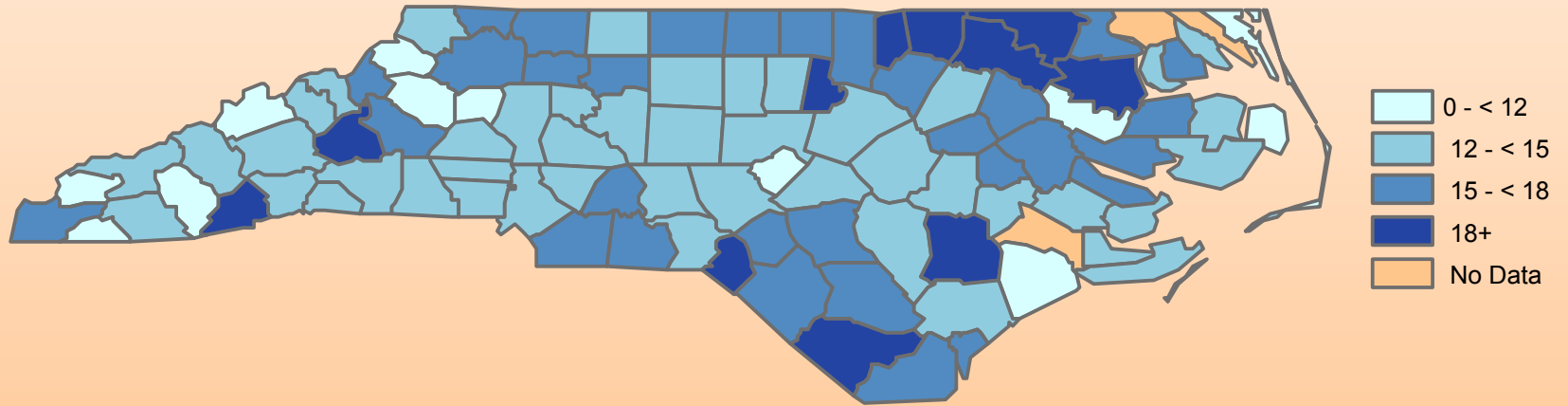
* < 2500 grams.

Prevalence of high birthweight*, by county



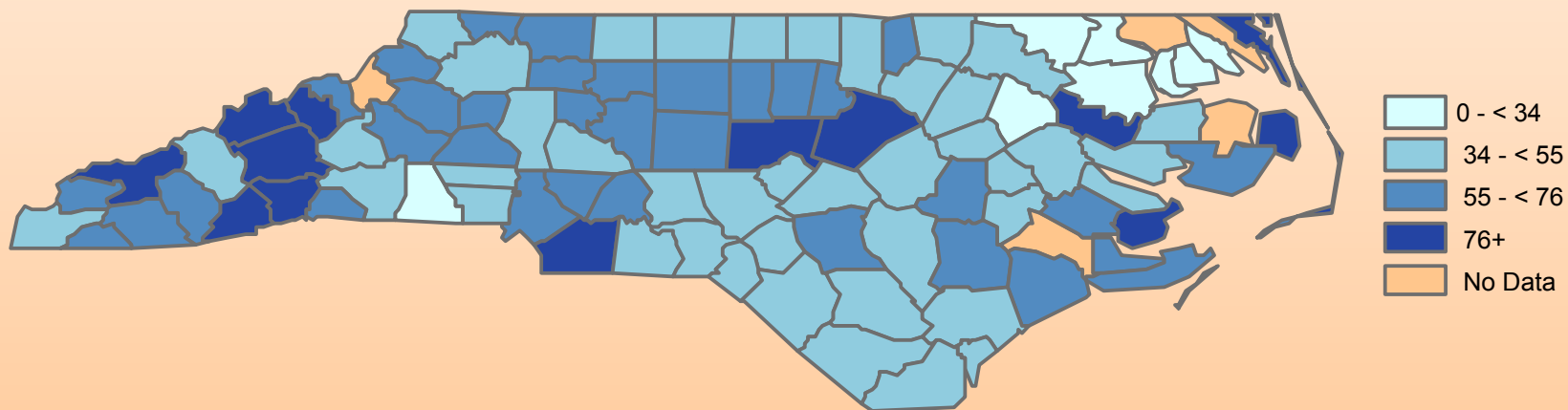
* > 4000 grams.

Prevalence of preterm delivery*, by county



* < 37 weeks gestation.

Percentage of infants ever breastfed*, by county



* Reported by mother at postpartum visit..