

# STATE OF MOTHERS AND INFANTS IN MIAMI-DADE COUNTY:

A REPORT FROM  
THE HEALTHY  
START COALITION  
OF MIAMI-DADE

2008



# The State of Mothers and Infants in Miami-County: An Update

Dear Readers,

Incorporated on April 1, 2001, the Healthy Start Coalition of Miami-Dade, Inc. (Coalition) is a community-based non-profit 501(c)3 corporation that serves women of childbearing age, pregnant women and infants in Miami-Dade County. The Coalition serves as a prenatal and infant care coalition and has evolved into one of the lead organizations in Miami-Dade County providing services in maternal, infant and child health, specifically targeting pregnant women and infants from birth to three years of age. As we build on our foundation of current programs, the Coalition strives to extend services to all pregnant women and their children in Miami-Dade County through new program implementation, creative outreach and empowerment strategies.

I am pleased to share this report as part of our ongoing effort to compile, review and synthesize data for both our planning and implementation processes and to assist community stakeholders with their own. This report serves as an update and interim informational and planning instrument until the next publication of our countywide maternal and infant health needs assessment in 2010. Some of the information and data in this report is alarming. However, we urge you to become familiar with the specific data for your community, explore what specific risk factors are prevalent in your local area, and to become active in the dissemination of this information.

Thank you to the staff who worked arduously to prepare this report and ensure its timely preparation. Additional thanks to my esteemed colleagues on the Board of Directors for their continued commitment and passion for the health and well-being of our women, mothers and infants.

Sincerely,

*Kalenthia Nunnally*

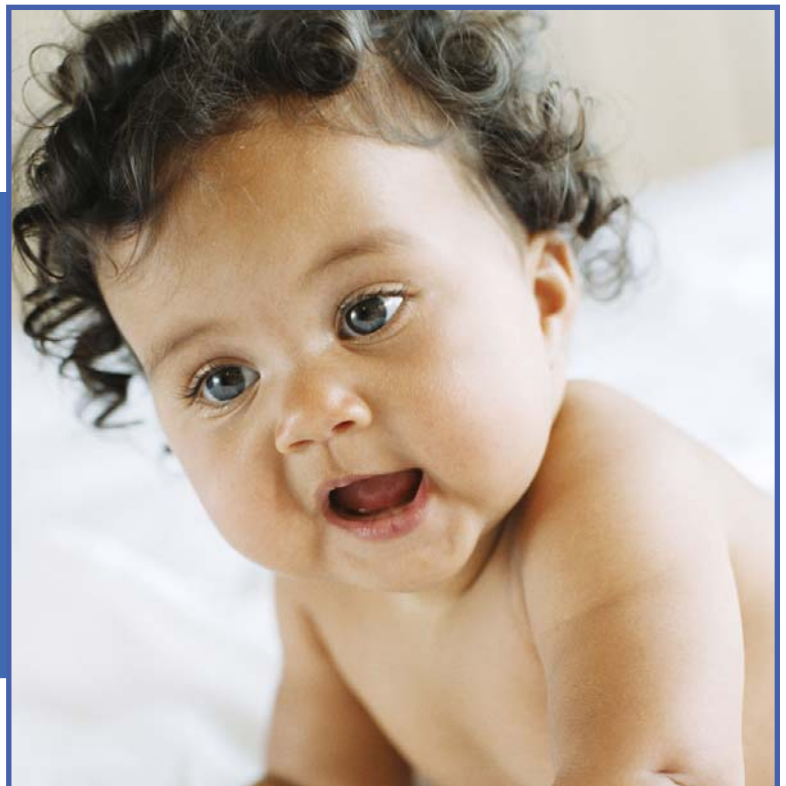
Kalenthia Nunnally  
President, Board of Directors  
Healthy Start Coalition of Miami-Dade

# Introduction

*The State of Mothers and Infants in Miami-Dade County* is a brief synopsis of the current condition of maternal and infant health in Miami-Dade County. This report serves as an update to the Healthy Start Needs Assessment 2006, a surveillance effort undertaken by the Healthy Start Coalition of Miami-Dade (Coalition) as mandated by the State of Florida. Every five years the Coalition is required to engage in a formal process of identifying problems and assessing the community's capacity to address health and social service needs. The resulting document – a needs assessment – provides an overall picture of the health and status of the women and infants in the County. The **Healthy Start Needs Assessment 2006** examined the health indicators which were presented in the 2001 Needs Assessment as well as other health indicators which have become recognized as important outcome indicators of the health of a community. The assessment evaluated maternal, infant and child health indicator trends through 2005 or 2006 as data was available. The objective of The State of Mothers and Infants report is to review select maternal and infant health indicators throughout Miami-Dade County prior to the publication of the next Needs Assessment, due out in 2010. This report serves as an interim planning tool for the Coalition and other community-based and non-governmental agencies with interests, priorities and plans related to maternal and infant health and social services in Miami-Dade County. The monitoring of this data is essential to the Coalition's primary goals of reducing infant mortality and the number of low birth weight and preterm births, while improving health and developmental outcomes of newborns in the County and the State.

For a detailed action plan that addresses many of the indicators in this document and delineates the key strategies adopted by the Healthy Start Coalition of Miami-Dade, please see the **2006-2010 Service Delivery Plan** which can be reviewed online at [www.hscmd.org](http://www.hscmd.org).

*The monitoring of these data is essential to the Coalition's primary goals of reducing infant mortality and the number of low birth weight and preterm births, while improving health and developmental outcomes of newborns in the County and the State.*



Inside	Pg
Letter from the President of the Board of Directors	2
Introduction	3
Birth Outcomes Data	4
Demographics	4
Teen Births	5
Births to Unmarried Women	5
Prenatal Care Access	5
Low Birthweight & preterm Births	6
Fetal & Infant Deaths	7
Disparities	8-9
Looking to the Future	10-11

# Birth Outcomes Data: Racial Disparities Persist

According to the most recent data released by the Florida Department of Health, fewer infants are being born preterm (before 37 weeks) in Miami-Dade County and a higher percentage are born at healthy weights (greater than or equal to 2500g). Additional good news is that fewer young teens, 14 and under, are giving birth and overall the birth rate to teens (up to age 19 years) has been decreasing steadily over the past ten years and at 36.0 is considerably lower than the overall State rate of 43.5.

Unfortunately, fewer women are accessing prenatal care during the first trimester, there are more births to unwed mothers, and repeat births to teens have increased.

Also of concern is that women and infants in certain zip codes, specifically Black/African-American women and infants, have very different outcomes than women in Miami-Dade County as a whole. There have been several positive trends related to the health status of mothers and infants. In spite of these trends, the continued presence of racial and ethnic disparity in health outcomes remains prominent. In many areas where outcomes have

improved, they remain poorer than State averages. For example, although the County has seen overall decreases in the percent of infants born preterm, this benefit did not extend to Black/African-American women. Among Black/African-American women, the rate of preterm births is still higher (18.9 in 2006) than it was ten years ago (17.9 in 1997), indicating that not much progress, if any, has been made in reducing preterm births among this population.

The State of Mothers and Infants in Miami-Dade County examines the latest data available regarding infants born in Miami-Dade County and serves as an update to the **2006 Healthy Start Needs Assessment**. Comparisons are made between Miami-Dade County and the State, and trends in maternal and infant health are examined.

## Birth Outcomes Data: Progress Snapshot

### Positive Changes in Outcomes

- ↓ Number of Teen Births (ages 14 and under)
- ↓ Rate of Low Birthweight Babies
- ↓ preterm Birth Rate (less than 37 weeks)
- ↓ Maternal Mortality

### Negative Changes in Outcomes

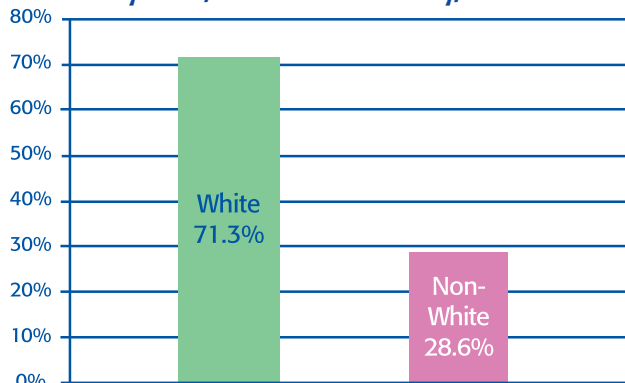
- ↑ Teen Birth Rate (ages 15-19)
- ↑ Percentage of Repeat Teen Births
- ↑ Percentage of Births to Unwed Mothers
- ↓ Prenatal Care in the 1st Trimester
- ↑ Infant Death Rate
- ↑ Fetal Death Rate

## Demographics

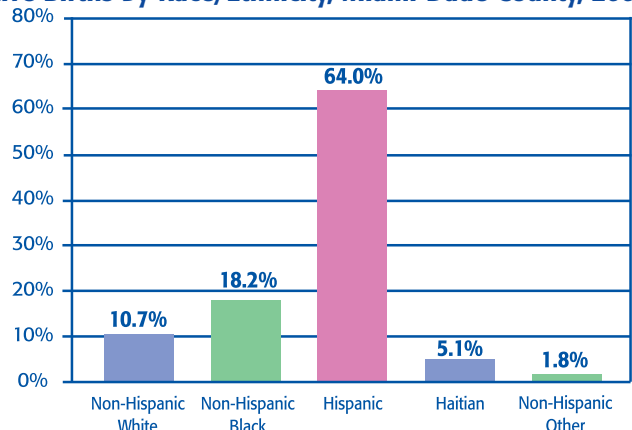
The current population in Miami-Dade County is 2,402,208, a 6.6% increase from the population recorded in the 2000 United States census. The number of infants born in Miami-Dade County has also increased steadily over the past decade by 7.8%. In 2006, 33,739 infants were born in Miami-Dade County – an increase of 1,374 from 32,365 born in 2005. Of these, approximately 66% were Hispanic, 10.7% were Non-Hispanic White, 18% were Non-Hispanic Black, and 5% were

Haitian. The number of infants born increased from 2005 among all race/ethnicities, with the exception of Haitians, which decreased slightly from 1,740 to 1,736. The number of Non-Hispanic Whites had the greatest growth, with an increase of 6.4%, from 3,402 to 3,620. However, Hispanics continue to be the largest ethnic group in Miami-Dade County.

Live Births by Race, Miami-Dade County, 2006



Live Births by Race/Ethnicity, Miami-Dade County, 2006



# Teen Births

Miami-Dade County witnessed a decrease in the number of young girls (14 and under) giving birth and continues to have a lower teen birth rate for 15-19 year olds than the state as a whole, 36.0 to 43.5 respectively. Unfortunately this is eclipsed by an increase in the teen birth rate for 15-19 year olds at the county, state and national levels. Equally of concern is the increase in the birth rate among teens ages 15-17 to 20.2 in 2006 from 18.8 in 2005. An increase in the percentage of repeat births to teens is also disconcerting, with a rate of 13.8 in 2006 the highest in over 5 years. However, the latter remained lower than the state average of

16.5%. These data require immediate attention and action and must be monitored carefully to deter the continued increase of these rates.

Teen Births		
Indicator	Miami-Dade County	Florida
Teen Births (rate per 1,000 females 15-19 years)	36.0	43.5
Repeat Teen Births (percentage of births to females ages 15-19 years)	13.8%	16.5%
Number of Births to Females Ages 14 Years and Younger	42	353

Source: FloridaCHARTS.com, Florida Department of Health, Office of Planning, Evaluation and Data Analysis, (850) 245-4009

# Births to Unmarried Women

Births to unmarried women have been increasing steadily over the past ten years, reaching a high of 47.1 in 2006. In some zip code areas the rates are startlingly high. For example, in Wynwood (33127), as well as Opa Locka (33154), Allapattah (33142), Liberty City (33147), Overtown (33136) and Carol City (33154) three out of every four infants were born to unmarried mothers.

From 2005 to 2006 the percentage of unmarried mothers increased for all races/ethnicities; Non-Hispanic Whites (37.6 to 39.8%), Non-Hispanics Blacks (70.4 to 71.1%) and Hispanics (40.1 to 42.9%).

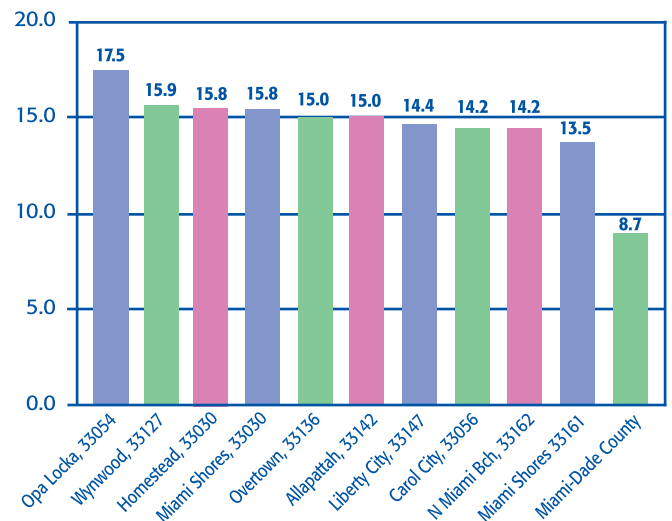
Births to Unmarried Women		
Indicator	Miami-Dade County	Florida
Births to Unwed Mothers	47.1%	44.6%

Source: Florida CHARTS, website: www.floridacharts.com, June 2008

# Prenatal Care Access

Access to prenatal care or lack thereof has long been touted as one of the primary risk factors for poor birth outcomes. In the recent past the benefits of prenatal care have been the topic of much discussion, as researchers and planners have examined not just the number of prenatal care visits but their content. A combination of these two measures comprise indices which now measure adequacy of prenatal care and provide us with a better landscape of the quality versus quantity of prenatal care. The rate of women receiving prenatal care in the first trimester in Miami-Dade County has been declining steadily over the past 5 years and is at an all time low in 10 years, 82.8%. However, this rate is higher than the overall average across the state. Again, certain geographic areas are not faring as well as the County as a whole. For example, in Opa Locka (33054), twice as many women do not receive adequate prenatal care as in the County (8.7%) and in general non-Hispanic Black and Haitian women are less likely than whites to enter prenatal care early.

Percentage of Mothers with Inadequate\* Prenatal Care by Zip Code, Miami-Dade County, 2006





# Low Birthweight & Preterm Births

The percent of low birthweight infants decreased minimally from 9.0% in 2005 to 8.6% in 2006. However, the number of very low birthweight infants increased to a ten-year high of 557 infants (1.7%) in 2006. Miami-Dade County's statistics are comparable to the State average of 8.7% and remain above a record low of 7.9% ten years ago. As noted in previous sections, certain geographic areas and racial/ethnic groups demonstrated alarmingly higher rates than the overall County. In Florida City/Goulds (zip code 33170), 16.8% of infants were born with a low birthweight. More than 10% of infants born in an additional fifteen (15) zip codes across the county were low birthweight. Preterm births have also increased from a ten year low of 12.0% in 2002 to 15.1% in 2006.

As the Outcomes Comparison for Selected Risk Factors Table (page 7) illustrates, women over age 35 are particularly more likely to give birth to low birthweight or preterm infants. This is noteworthy because the number of

women giving birth at older ages has increased steadily over the past decade. The number of births to women age 35-44 has increased 26.3% (4,500 to 5,682) and the number of births to women over 45 is 58.5% greater (41 to 65) than ten years ago.

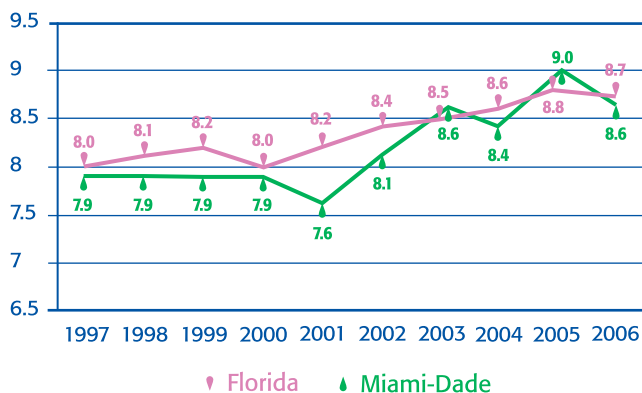


## Low Birthweight and preterm Births

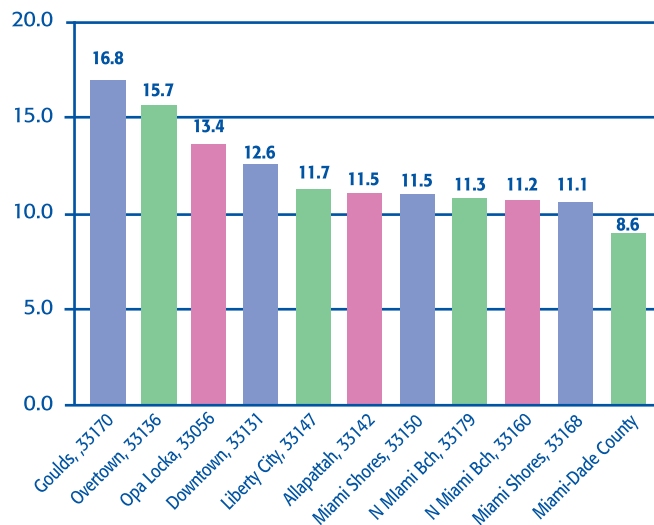
Indicator	Miami-Dade County	Florida
Low Birthweight (2,500 grams or less)	8.6%	8.7%
Very Low Birthweight (1,500 grams or less)	1.7%	1.6%
Preterm Births (less than 37 weeks)	15.1%	14.2%

Source: FloridaCHARTS.com, Florida Department of Health, Office of Planning, Evaluation and Data Analysis, (850) 245-4009

**Low Birthweight Births (< 2500 grams of 5 lbs 8 ozs) Florida vs. Miami-Dade, 1997-2006**



**Highest Percentage Low Birthweight Babies by Zip Code, Miami-Dade County, 2006**



# Fetal & Infant Deaths

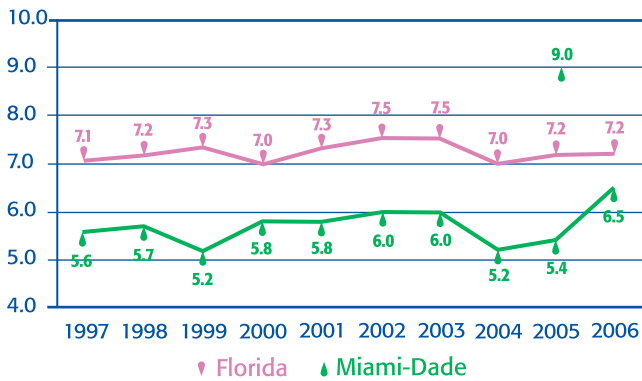
Infant mortality, a key indicator of the overall health of a community, has been increasing over the past 3 years, from a ten year low of 5.2 in 1999 to a high of 6.5 in 2006 during that same time period. In comparison to the State, Miami continues to maintain an infant mortality rate lower than that of Florida's infant death rate which has remained largely unchanged for the last decade.

Fetal deaths in Miami-Dade County have decreased to 8.2 in 2006 from 8.3 in 2005. The current rate is the lowest in a ten year period, but unfortunately remains higher than the fetal death rate for the State.

Fetal and Infant Deaths		
Indicator	Miami-Dade County	Florida
Fetal Deaths (rate per 1,000 live births plus fetal deaths)	8.2	7.4
Infant Deaths (rate per 1,000 live births)	6.5	7.2

Source: Florida CHARTS, website: www.floridacharts.com, June, 2008

**Infant Mortality Rate (per 1,000 live births)  
Florida vs. Miami-Dade County, 1992-2003**



*From 2004 to 2006,  
51 more babies died in  
Miami-Dade County  
before their first birthday.*

*In 2012, there will be  
two less first grade  
classes of children  
because these babies died.*

## Outcomes Comparison for Selected Risk Factors

### Percentage of All Live Births

	2004	2005	2006
Maternal Age 35+	17.4	17.1	17.0
Education < 12 years	18.6	18.2	17.5
Unwed	43.4	45.4	47.1
Obesity (BMI 30.0+)	12.1	15.1	16.0
Underweight (BMI <18.5)	3.9	4.2	4.4
Inter-pregnancy Interval < 18 mos	16.1	17.3	17.3

### Percentage of Born Low Birthweight

	2004	2005	2006
Maternal Age 35+	19.1	19.5	19.5
Education < 12 years	21.2	21.5	19.4
Unwed	49.3	54.0	52.6
Obesity (BMI 30.0+)	12.4	16.2	15.8
Underweight (BMI <18.5)	4.9	5.8	5.8
Inter-pregnancy Interval < 18 mos	12.7	14.7	14.4

### Percentage of Babies Born preterm

	2004	2005	2006
Maternal Age 35+	19.4	19.4	19.8
Education < 12 years	19.7	19.8	18.3
Unwed	47.1	49.7	50.5
Obesity (BMI 30.0+)	14.1	17.8	18.6
Underweight (BMI <18.5)	3.8	4.3	4.9
Inter-pregnancy Interval < 18 mos	17.0	18.2	18.4

# Disparities

Although conversations about race and comparisons between racial groups are sensitive and can be contentious, they are critical to this report. It is difficult to ignore the differences in risk factors and outcomes that exist and how wide that gap is in many areas.

Many of the outcomes and risk factors presented in this document disproportionately affect certain racial and ethnic groups, namely Non-Hispanic Blacks/African-Americans. For almost every indicator examined, Black/African-American women and infants have worse health outcomes than Whites. The disparities between White and Non-White groups in infant death, low birth weight and risk factor prevalence are wide and, in many cases, are growing. Although infant mortality rates are on the rise among both racial groups, the increase over the past decade is greater among Non-Hispanic Blacks/African-Americans. Furthermore, the proportional discrepancy or “gap” between Non-Hispanic Blacks and Whites remains largely unchanged.

The rate of maternal mortality among Non-Hispanic Blacks/African-Americans is at least 4 to 6 times higher than among White women. Non-Hispanic Black/African-American women continue to be three to four times more likely than White women to die of complications during pregnancy or within a year postpartum.

Rates of low birth weight have risen recently for both white and Non-Hispanic Black/African-American women. However, Non-Hispanic Black/African-American women are still 1.5 times more likely to have a low birth weight baby than White women. Non-Hispanic Blacks also are more likely to have other risk factors, such as young maternal age, high birth order (that is, having many live births), less education, and inadequate prenatal care. Racial disparities also continue to exist across all other birth outcomes. For example, the percent of teen births (among Non-Hispanic Blacks/African-Americans) is much higher than that of whites (15.0 vs. 7.0) and has remained largely unchanged in the past three years. Non-Hispanic Black/African-American women are also less likely to receive early prenatal care – only 63.66% access prenatal care in the first trimester. In contrast, 77.2% of White women receive prenatal care in the first trimester. Moreover,

Non-Hispanic Black women are more than twice as likely to receive inadequate prenatal care as White women, 13.9 vs. 6.9 respectively.

It is noteworthy to point out that most of the neighborhoods and zip codes areas with the highest rates of negative outcomes or risk factors are primarily populated by Non-Hispanic Black/African-American families.

Although disparities are not the focus of this document, it is necessary to emphasize the disparities that have historically existed and the lack of progress made nationally, statewide and locally to reduce and eliminate the gap. Social inequalities in areas such as poverty, discrimination, and lack of education among others, are important risk factors for poor birth outcomes and poor infant health. We can no longer ignore these data or these disparities.



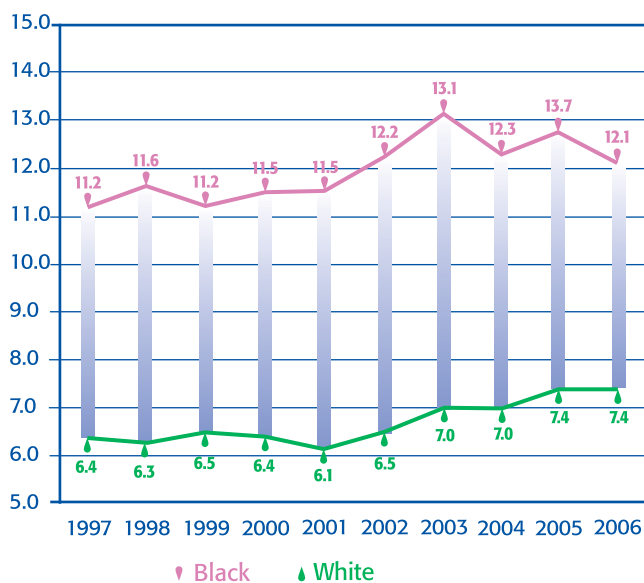


## Disparities

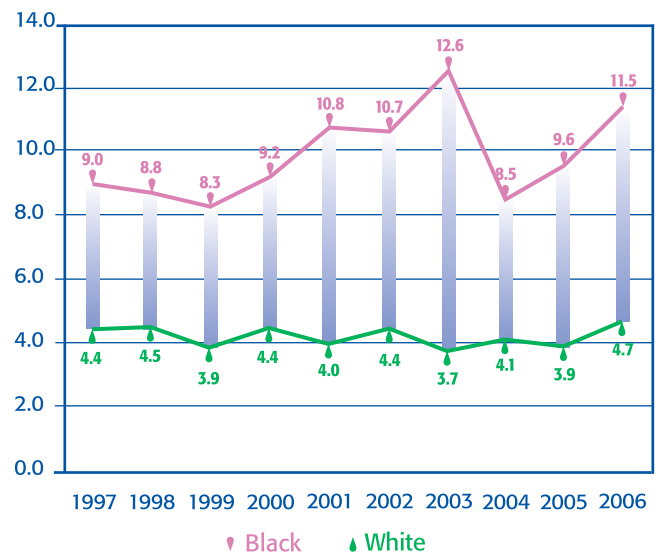
### Miami-Dade County Racial Disparities by Selected Indicators, 2006

	White	Black	Other
Births (number)	24,630	8,282	782
Low Birthweight < 2500 grams (%)	7.4	12.1	8.8
Preterm Birth (< 37 weeks)	13.9	18.9	12.9
Prenatal Care (%)			
Began First Trimester	77.2	63.6	74.9
Late (Third Trimester) or No Care	2.9	6.2	3.2
Inadequate (Kotelchuck Index)	6.9	13.9	8.7
Teen Births			
15-19 (%)	7.1	15.0	5.0
14 and younger (number)	20	21	1
Maternal Education < 12 years	16.5	21.5	8.6
Unwed Mother	39.8	71.1	24.2
Interpregnancy Interval < 18 months	16.5	19.8	17.0
Obesity (BMI 30.0+)	13.3	24.6	7.2
Mortality (rate per 1,000)			
Fetal (20+ weeks gestation)	6.7	12.8	7.7
Neonatal (under 28 days)	3.2	7.0	3.8
Post-neonatal (28 days – 1 year)	1.5	4.5	3.9

**Low Birthweight Births (< 2500 Grams or 5 lbs 8 ozs)  
White vs. Black/AA, 1997-2006**



**Infant Mortality Rate (per 1,000 live births) by  
Maternal Race, Miami-Dade County, 1997-2006**



# Moving Forward

For decades policy makers and legislators have denoted the importance of maternal and infant health by allocating funds for reviews of data, assigning committees or commissioning expert opinions, or by designating sections and chapters in documents such as Healthy People 2000 and Healthy People 2010. Unfortunately for some women and infants these intentions do not pan out into actual benefits. Most importantly for the disenfranchised and underserved the benefits of an honorable mention hardly ever translate into the provision of essential and much needed services. It has been well documented for many years that infant mortality and poor birth outcomes have multi-factorial roots. It is time to move past traditionally examined and well documented risk factors and onto the more challenging work of addressing the broad social issues which researchers have alluded to in their findings.

As a leader in the maternal and infant health community in Miami-Dade County, the Healthy Start Coalition of Miami-Dade has already begin addressing these issues locally. As the lead organization in the Black Infant Health Practice Initiative in Miami-Dade County, the Coalition is one of only eight selected statewide to implement an initiative dedicated to engaging and mobilizing communities to address the disparity in infant mortality between Blacks and Whites. Next steps for this Initiative include continued mobilization of the community, education of policy makers and legislators and sharing of information until the goals to eliminate the current disparity achieved.

The Coalition continues to examine related trends and data, share these data with the community and work toward continuous improvement. In 2008, the Healthy Start Coalition of Miami-Dade will continue providing services to those populations which are in most need: women of childbearing age, pregnant women, first time moms, Teen moms, women at risk for negative pregnancy outcomes, pregnant women enrolled in Medicaid and children to age 3. These services will be provided through our three major programs:

- **Healthy Start** – The Florida Healthy Start Initiative was designed to reduce infant mortality,

reduce the number of low birth weight infants and improve health and developmental outcomes. Florida Statute mandates that all pregnant women be offered the Healthy Start Prenatal Risk Screening at their first prenatal visit and the Healthy Start Infant (Postnatal) Risk Screening be offered to parents or guardians of all infants born in Florida before leaving the delivery facility. The Healthy Start Coalition of Miami-Dade was incorporated on April 1, 2001 and serves as a prenatal and infant care coalition. The Coalition is granted authority under Chapter 383.216, Florida Statute to implement the provision of the Florida Healthy Start Initiative, which include directing funds for continuous care coordination to pregnant women and children birth to age three, evaluating services, and quality improvement and assurance responsibilities.

- **HealthConnect In The Early Years** – a comprehensive, three-tier, quality-driven health initiative spearheaded by The Children's Trust. HealthConnect has three major components. Each component utilizes a team approach to connect the children of Miami-Dade County to health services. Created to promote healthier living and unify the fragmented health services in our community, the goal of HealthConnect is to:
  - improve access and use of quality health services
  - improve health awareness and behaviors through education
  - improve infant, child and adolescent health and development
  - facilitate community, environmental and lifestyle changes





This voluntary home visitation program focuses on health, education, promotion and support to improve maternal health, pregnancy outcomes and child health and development. A child's healthy development is dependent on the mother's health during pregnancy and the early years of the child's life. HealthConnect In The Early Years guides expectant teen moms, first-time mothers, infants and toddlers to live healthier lives by providing practical support and resources to ensure their physical, mental and emotional well-being.

- **MomCare** – a Medicaid-funded program authorized by a special waiver from the federal government. MomCare was developed through a partnership of the Florida Healthy Start Coalitions, the Florida Department of Health, the Florida Agency for Health Care Administration, and the U.S. Centers for Medicare and Medicaid Services. MomCare seeks to improve birth outcomes and infant health by providing the following services to Medicaid-eligible pregnant women:
  - Simplified Medicaid enrollment
  - Choice counseling for selection of maternity care providers
  - Care management to assist with initiation and use of prenatal care
  - Healthy Start services for at-risk women

These programs all have the goal of reducing infant mortality and morbidity, improving birth outcomes, and improving women's and infant health thus giving infants the best possible opportunities to be born healthy and start life with a strong foundation.

Many of the risk factors can be mitigated or prevented with good preconception and prenatal care, and increased outreach and education to high-risk areas and populations. Preconception screening and counseling offer an

opportunity to identify and mitigate maternal risk factors before pregnancy begins. The Healthy Start Coalition of Miami-Dade has taken a leadership role in providing interconceptional care education to women in Miami-Dade. Furthermore, the Coalition strives to reach and educate the vast majority of women and families in Miami-Dade County in topics relevant to maternal, infant and child health.

Our purpose with this report has been to denote and highlight those areas and issues that are within the scope of the Coalition's primary goals and to present these in a manner that promotes collaborative relationships to improve the health of women and infants in Miami-Dade County.



**Healthy Start Coalition  
of Miami-Dade**

701 S.W. 27th Avenue  
Suite 1401  
Miami, Florida 33135

Phone: (305) 541-0210  
Fax: (305) 541-0213

Web Site: [www.hscmd.org](http://www.hscmd.org)