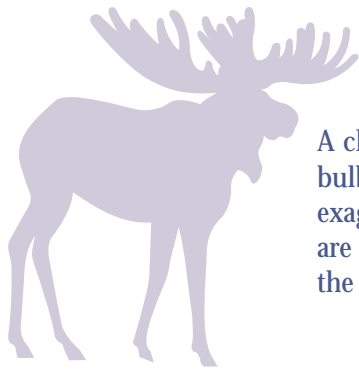


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# Infancy

Prenatal Care in Alaska  
Babies With Low Birth Weight  
Infant Mortality



A close-up portrait of a moose face would win no beauty contest . . . . The nose is long, bulbous, loose, and overhangs; the eyes are small; the ears long; the shoulder hump is exaggerated, and the legs are inordinately long . . . [but] when all the details of this appearance are assembled, the moose becomes a highly picturesque wilderness animal; and a large bull in the fall, with its spread of palmate antlers, is truly majestic.

Adolf Murie, *A Naturalist in Alaska*  
New York: Devin-Adair Company, 1963

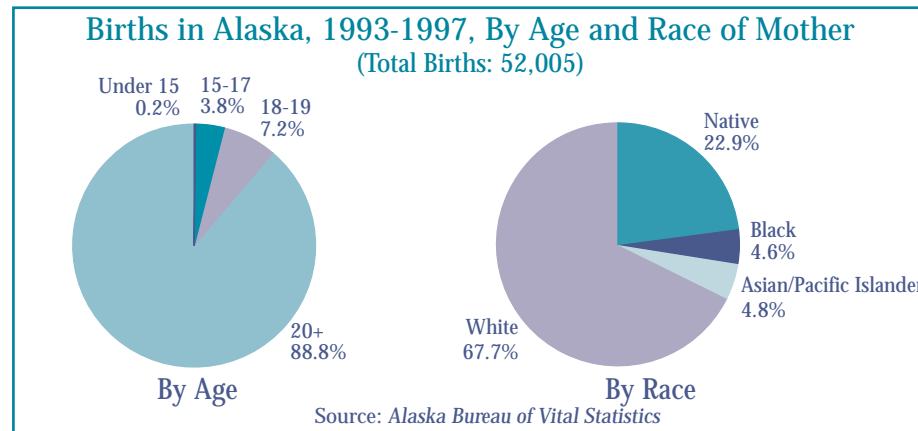
## DEFINITION AND SIGNIFICANCE

The Alaska Bureau of Vital Statistics uses the Kessner index to classify prenatal care as adequate, intermediate, or inadequate. Both the intermediate and the inadequate categories are considered “less than adequate” care.

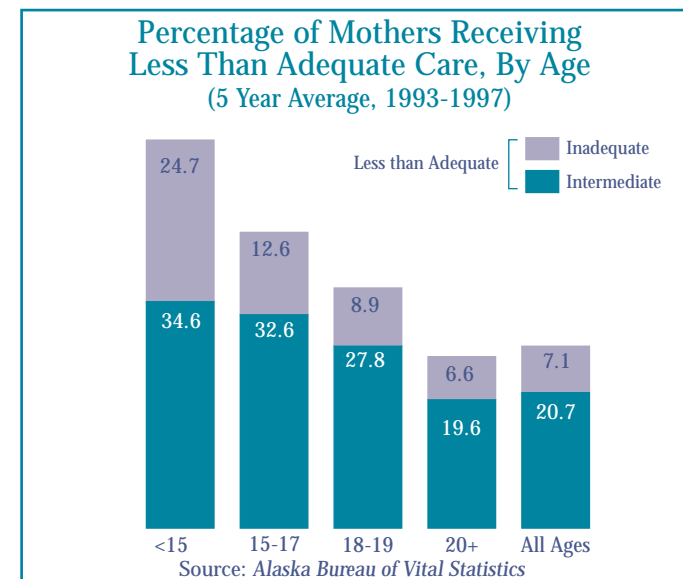
Pregnant women who see doctors or other health professionals at least once during the first trimester of their pregnancies, and at least nine times during their entire pregnancies, receive adequate prenatal care. Those who see doctors at least once during their first or second trimesters, and at least four more times during their pregnancies, receive intermediate care. Those who don't see doctors at all during their first or second trimesters, or fewer than five times throughout their pregnancies, receive inadequate care.

Women who see doctors throughout their pregnancies are more likely to detect any medical problems they or their babies might have and learn how to protect their babies by eating right and not smoking, drinking, or using drugs while they're pregnant. Babies born to mothers who receive little or no prenatal care are more likely to be born with low birth weights or to die during their first year.<sup>1</sup>

More than 52,000 babies were born in Alaska between 1993 and 1997—two-thirds to White mothers, almost one-quarter to Alaska Native mothers, and about five percent each to Black and Asian mothers. Ten percent were born to teenage mothers, mostly 18- and 19-year-olds, but a substantial number were also born to girls ages 15 to 17. The figures on this page and the next show differences in prenatal care among mothers by age, race, and region.

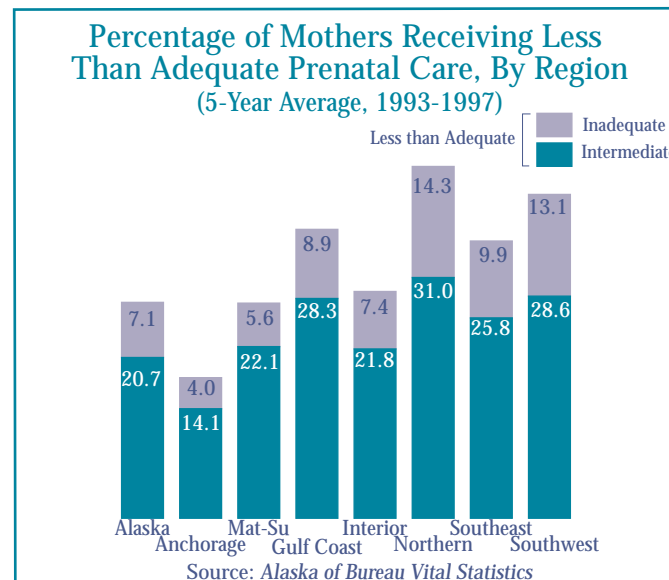
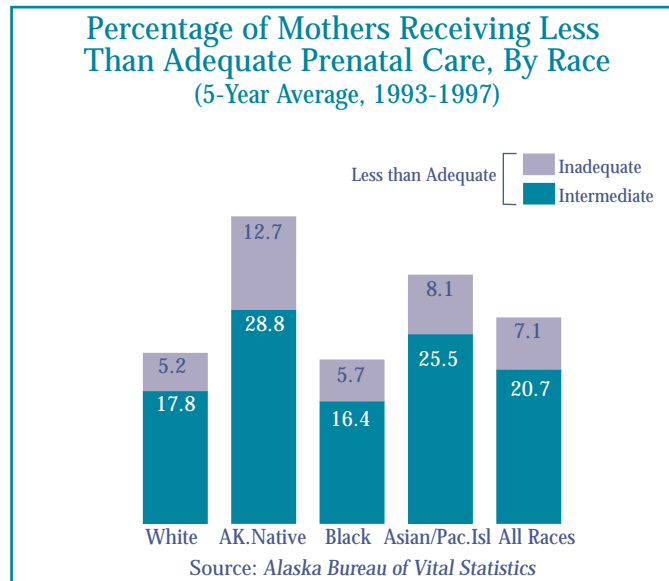


- Almost 28 percent of women who had babies in Alaska from 1993-1997 got less than adequate prenatal care.
- Teenage mothers, especially those under 18, are far less likely than older women to get adequate prenatal care. While about 26 percent of mothers 20 and older failed to get adequate care in the mid-1990s, that figure jumped to 45 percent among those 15-17.

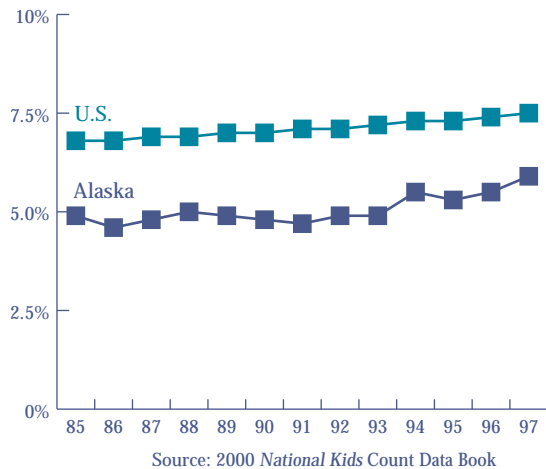


## PRENATAL CARE IN ALASKA (CONTINUED)

- White and Black women are more likely than Alaska Native and Asian women to get adequate prenatal care. On average from 1993 through 1997, less than one quarter of White and Black mothers but more than 40 percent of Native mothers got less than adequate care.<sup>2</sup>
- Pregnant women in Anchorage are far more likely than women in rural areas to get adequate prenatal care—at least in part because care is much more readily available in Anchorage. About 15 percent of pregnant women in Anchorage got less than adequate prenatal care in the mid-1990s, but that figure exceeded 45 percent in the Northern region and 42 percent in the Southwest.



**Percent of Babies With Low Birth Weight  
Trend 1985 - 1997**



About 1 in 20 babies born in Alaska from 1993 through 1997 weighed less than 5.5 pounds at birth. For more than a decade, Alaska has had among the lowest rates in the country for this indicator.

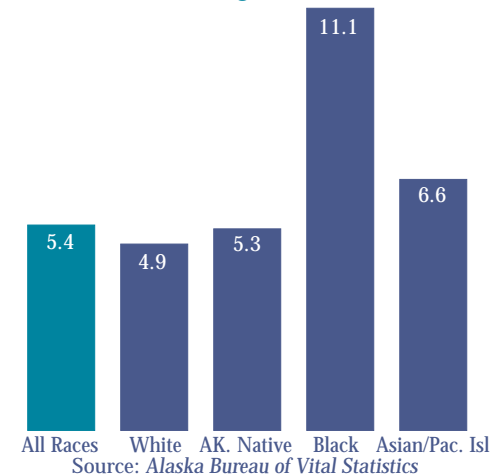
- Alaska ranked fifth in the nation on this indicator in 1997, with about 6 percent of babies weighing less than 5.5 pounds. Nationwide, about 7.5 percent of babies were that small at birth.
- Although Alaska has

fewer small babies than the national average, the percentage increased considerably in the 1990s, growing from 4.8 percent in 1990 to 6 percent in 1997.

- Black women in Alaska have small babies at about twice the rate of other racial groups.
- The share of small babies varies modestly by region in Alaska, with the highest rates in Anchorage and the Mat-Su region and the lowest in Southeast and Southwest Alaska.

Even though they make up only a small percentage of all babies born in Alaska, babies with low birth weights account for 35 percent of total health care costs for infants in the state.<sup>5</sup>

**Percent Alaska Babies with Low Birth Weight,  
By Race  
(5-Year Average, 1993-1997)**



**Percent of Alaska Babies with Low Birth Weight, By Region  
(5-Year Average, 1993-1997)**



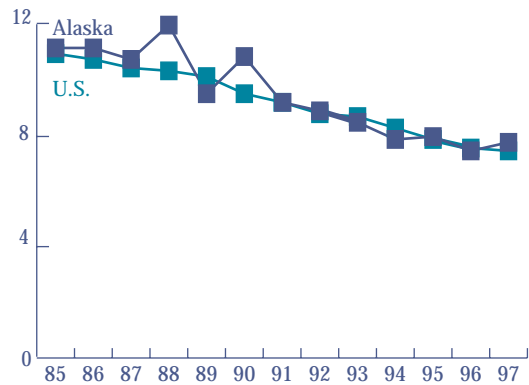
## DEFINITION AND SIGNIFICANCE

Babies weighing less than 5.5 lbs (or 2,500 grams) at birth are considered to have low birth weight. Regional figures are based on mother's place of residence rather than place of infant's birth.

Children who are too small at birth face increased risks of dying during their first year and are more likely to have developmental, behavioral, and physical problems later in life.

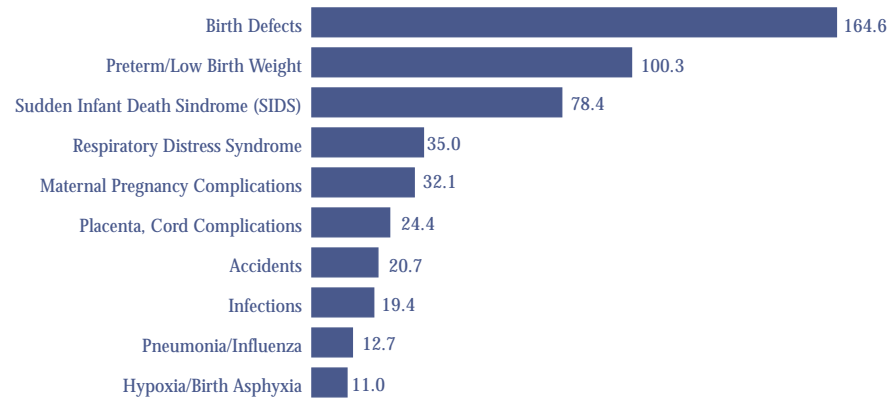
Small babies are more commonly born to low-income women who are likely to lack health insurance and thus receive inadequate prenatal care. Women who eat poorly and don't gain enough weight when they're pregnant are also more likely to have small babies. Pregnant women who smoke can double their risk of having small babies.<sup>3</sup> And mothers who are unmarried, have completed less than 12 years of schooling, or are teenagers also have increased risks of delivering small babies.<sup>4</sup>

**Infant Mortality Rate**  
Trend 1985 - 1997  
(Deaths Before Age 1, Per 1,000 Live Births)



Source: 2000 National Kids Count Data Book

**Ten Leading Causes of Infant Mortality in U.S., 1996**  
(Rate per 100,000 Live Births)



Source: National Center for Health Statistics

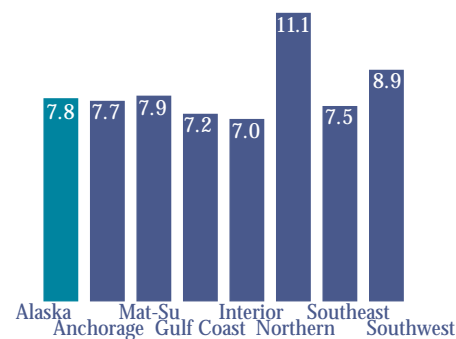
## DEFINITION AND SIGNIFICANCE

The infant mortality rate is the number of deaths among infants less than one year old, per 1,000 live births. Infant deaths are reported by place of residence rather than place of death. The infant mortality rate is a common measure of community health. Once babies make it past their first birthdays, they are more likely to live to adulthood.

- About 8 of 1,000 infants born in Alaska from 1993-97 died before age 1.
- Alaska's infant mortality rate in 1997 was close to the U.S. average.
- Rates of infant death in Alaska and in the U.S. have declined sharply in the past 15 years, but are not the lowest among developed nations. Japan, Canada, Britain, and France all have lower rates.<sup>6</sup>

- Infants who are born prematurely, who have low birth weight, or who are born at the same time as one or more siblings have a higher risk of dying in the first year of life.<sup>7</sup>

**Infant Mortality Rate By Region**  
(Per 1,000 Live Births 5-Year Average, 1993-1997)



Source: Alaska Bureau of Vital Statistics

## NOTES FOR INFANCY SECTION

<sup>1</sup>National Center for Health Statistics. *1995 Birth Statistics Released* (1997). Available: [www.cdc.gov/nchs/releases/97facts/95natrel.htm](http://www.cdc.gov/nchs/releases/97facts/95natrel.htm)

<sup>2</sup> The high rate of inadequate prenatal care among Native women is likely due in part to the limited health care available in villages.

<sup>3</sup> See note 1.

<sup>4</sup>Alaska Bureau of Vital Statistics (1999). "Low Birth Weight Babies, 1990-1998," *Alaska Vital Signs*, 7(1).

<sup>5</sup> See note 4.

<sup>6</sup> United States Census Bureau, *International Data Base* (as of 28 December 1998). Available:

[www.census.gov/ipcwww.idbnew.html](http://www.census.gov/ipcwww.idbnew.html)

<sup>7</sup> National Center for Health Statistics (1998). *New Study Identifies Infants at Greatest Health Risk*. Available:

[www.cdc.gov/nchs/releases/98facts/linkedbd.htm](http://www.cdc.gov/nchs/releases/98facts/linkedbd.htm)