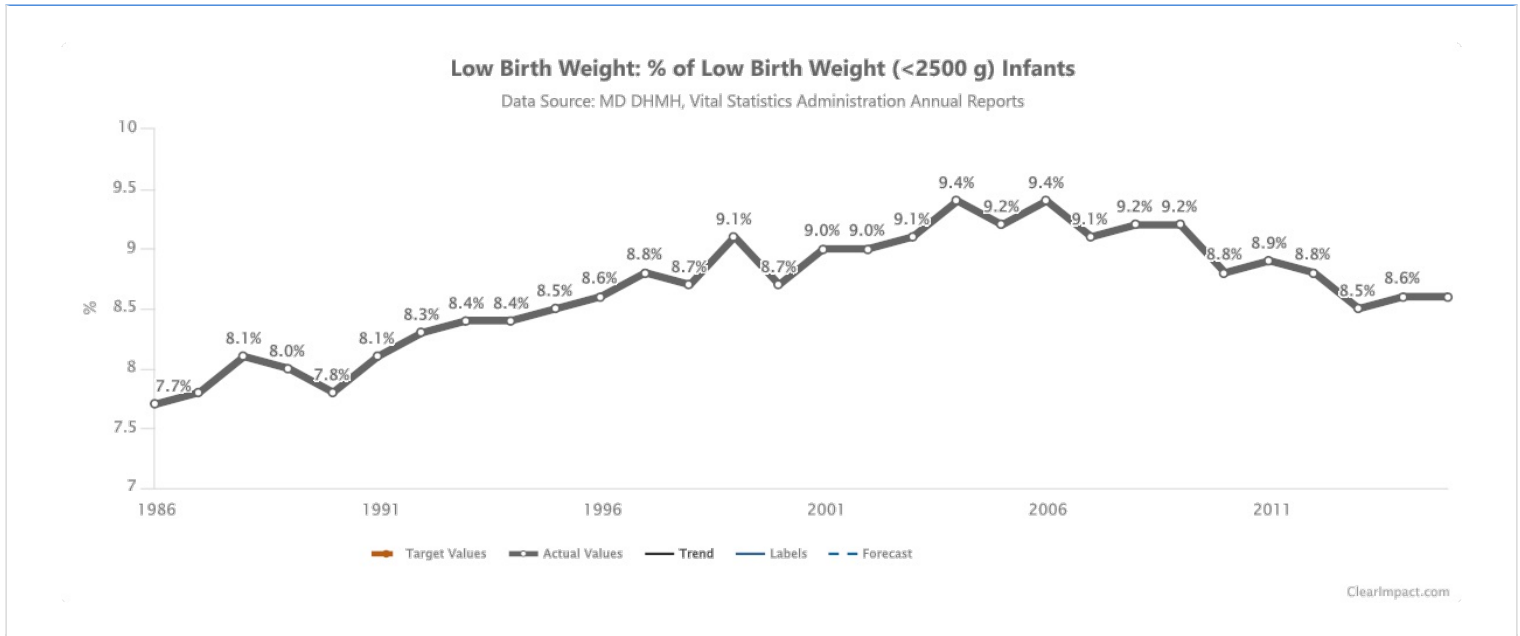


## R Babies Born Healthy (Statewide)

### I Low Birth Weight: % of Low Birth Weight (<2500 g) Infants



## Story Behind the Curve

Low birth weight (LBW) is a significant contributor to infant mortality, and infants with LBW are also at increased risk of developmental delays. Low birth weight infants may be either born prematurely (before 37 weeks gestation) or full-term (37 to 41 weeks gestation), but small for gestational age.

In 2015, the percent of infants with LBW born in Maryland remained unchanged from 2014 at 8.6%, but continues to be higher than the national average of 8.1%. While the percent of infants with LBW increased in Maryland and nationally between 2001 and 2006, the rate has declined in Maryland and nationally since that time.

Some of the same racial disparities occur in LBW as in infant mortality, with Black infants nearly twice as likely to be born at LBW compared to White infants.<sup>[1]</sup> Key maternal risk factors for LBW include chronic disease (such as hypertension), smoking, obesity, unintended pregnancy, late or no prenatal care, and maternal age.

LBW remains a key indicator both in Maryland and nationally. In 2010, the U.S. Department of Health and Human Services launched [Healthy People 2020](#), a ten year plan for improving America's health, and included the goal of reducing low birth weights to 7.8% of all live births by 2020. Maryland continues its work to ensure an ongoing decline in the percentage of LBW infants through a number of programs at the Department of Health and Mental Hygiene's [Maternal and Child Health Bureau](#).

## What Works

The Prevention and Public Health Administration (PHPA), Department of Health and Mental Hygiene (DHMH) continues to pursue multiple LBW prevention strategies, including those for reducing racial disparities, targeting at-risk women of childbearing age, reducing Sudden Unexpected Infant Deaths (SUID) by promoting safe sleep practices, improving access to oral health care for pregnant and postpartum women, and promoting early prenatal care. In addition, DHMH is specifically initiating efforts for addressing behavioral health and substance use disorder needs during pregnancy and after delivery.

## Local Highlight

The Maryland Advanced Perinatal System Support (MAPSS) Program is another DHMH initiative designed to support the perinatal system of care. The State's two academic medical centers (University of Maryland at Baltimore and Johns Hopkins University) jointly provide high risk perinatal support, outreach education, and maternal transport support to hospitals and perinatal providers throughout the State. In FY 2016, the Maryland Perinatal Neonatal Quality Collaborative implemented an initiative to reduce low-risk primary cesarean section rates and standardize the care of neonatal abstinence syndrome. For more information about Maryland's Quality Collaborative's Activities go to: <http://transform.childbirthconnection.org/resources/collaboratives/>

## Data Discussion

The percent of all births and births in selected racial groups with birth weight less than 2,500 grams (approximately 5.5 pounds).