Prenatal Care-Births to Women (10-19 yrs) Receiving Late (3rd Trimester) Prenatal Care

Number and percent live births for females ages 10-19 yrs (2012-2014)

**Why This Matters:**
Early, high-quality prenatal care can help to prevent poor birth outcomes by enabling early identification and, where possible, treatment of health problems. Such care can also provide an opportunity to educate or counsel pregnant women about the adverse effects of behaviors such as alcohol, tobacco, or other drug use that increase their risk of poor outcomes for their baby. Such preventive measures as nutrition counseling and HIV testing can have important long-term effects on the health and well-being of the baby (National Center for Health Statistics, 1996).

The percent of early prenatal care births is calculated by dividing the number of births that benefited from early prenatal care (defined as starting care in the first three months or first trimester of pregnancy) by the total number of births where the first month of prenatal care was known. The percent of late or no prenatal care births is calculated by dividing the number of births that received late or no prenatal care (defined as starting care in the last three months of pregnancy) by the total number of births where the first month of prenatal care was known.

**Data Provider:**
NYS Department of Health

**Data Source:**
NYS Department of Health; Bureau of Biometrics - birth certificates
Prenatal Care - Births to Women (10-19 yrs) Receiving Late (3rd Trimester) Prenatal Care

Number and percent live births for females ages 10-19 yrs (2009-2011 / 2012-2014)

Why This Matters:
Early, high-quality prenatal care can help to prevent poor birth outcomes by enabling early identification and, where possible, treatment of health problems. Such care can also provide an opportunity to educate or counsel pregnant women about the adverse effects of behaviors such as alcohol, tobacco, or other drug use that increase their risk of poor outcomes for their baby. Such preventative measures as nutrition counseling and HIV testing can have important long-term effects on the health and well-being of the baby (National Center for Health Statistics, 1996).

The percent of early prenatal care births is calculated by dividing the number of births that benefited from early prenatal care (defined as starting care in the first three months or first trimester of pregnancy) by the total number of births where the first month of prenatal care was known. The percent of late or no prenatal care births is calculated by dividing the number of births that received late or no prenatal care (defined as starting care in the last three months of pregnancy) by the total number of births where the first month of prenatal care was known.

Data Provider:
NYS Department of Health

Data Source:
NYS Department of Health; Bureau of Biometrics - birth certificates