Maternal and child health covers a broad range of health behaviors, conditions, and health system factors that impact health and quality of life for women, children, and families. Pregnancy provides a chance to identify health risks a woman has, such as hypertension, depression, tobacco use, and unhealthy weight. Addressing these risks can help prevent future health issues for women and their children. Increasing access to quality care both before pregnancy (preconception) and between pregnancies (interconception) can reduce the risk of pregnancy-related complications and maternal and infant mortality. Early identification and treatment of health issues among babies can help prevent disability or death.1

The Maine infant mortality rate decreased by 20% between 2005 and 2009, though the change was not statistically significant. Despite this decrease, one Maine baby died every five days, on average, during 2009. There was no improvement between 2000 and 2010 in the percentage of pregnant women in Maine who received early and adequate prenatal care or the percentage of new mothers who reported their pregnancy was intended.2

About one in five Maine children and youth (19.4%) were reported to have special health care needs in 2009-2010, which was significantly higher than the U.S. rate of 15.1%.3

Reproductive health measures chosen for inclusion in the State Health Assessment include:2
- Live births, fertility rates, and adolescent births
- Live births where the pregnancy was intended
- Low birth weight (<2500 grams)
- Breastfeeding
- Infant mortality
- Early and adequate prenatal care
- Smoking during the last 3 months of pregnancy
- Contraception use by sexually active high school students
- Birth control pill use among sexually active high school students
- Condom use among sexually active high school students
- Condom use among sexually active middle school students

Children with special health needs measures chosen for inclusion in the State Health Assessment include:2
- Children with special health care needs
- Type of special health care needs
- Autism spectrum disorders

Additional maternal and child health related measures can be found in most of the other sections of the State Health Assessment.

The status of maternal and child health measures included in the State Health Assessment often varies across population groups in the state. For example, babies born to mothers who are Black or African American are twice as likely to die before their first birthday as babies born to mothers who are White. New mothers with less education or lower household income are significantly less likely
to report that they did not smoke cigarettes during
the last 3 months of their pregnancy or that their
pregnancy was intended than were new mothers
with more education or income. Sexually active
male high school students are significantly less
likely than sexually active female students to report
they used any contraception the last time they had
sex. While some reproductive health measures
vary by county or Public Health District, no one
county or district is at increased risk relative to the
state on all, or most, measures.³

Healthy Maine 2020 includes the following
reproductive health related objectives:⁴
- Reduce preterm births
- Increase the proportion of births that are the
result of an intended pregnancy
- Reduce the rate of infant death
- Increase the proportion of pregnant women who
receive early and adequate prenatal care
- Increase abstinence from alcohol among
pregnant women
- Increase abstinence from cigarette smoking
among pregnant women

Additional objectives related to maternal and child
health can be found in most of the other topic areas
of Healthy Maine 2020.


healthy-maine/index.shtml.