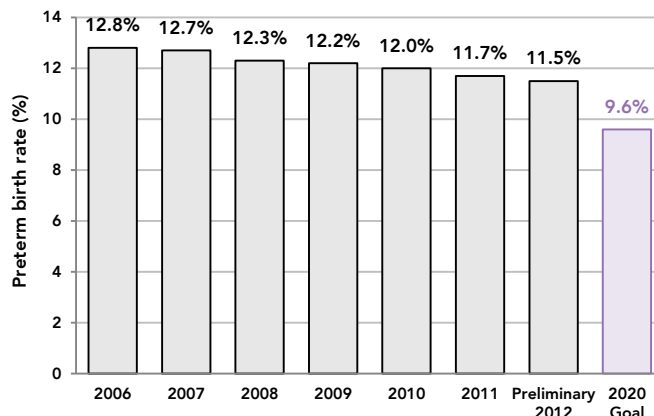


# March of Dimes 2013 Premature Birth Report Card

The March of Dimes is leading the Prematurity Campaign to reduce the nation's preterm birth rate to 9.6 percent or less by 2020. This annual Premature Birth Report Card measures progress by comparing each state's rate to the goal of 9.6 percent. The March of Dimes and the Association of State and Territorial Health Officials have also established an interim goal to reduce premature birth by 8 percent by 2014. All states, the District of Columbia and Puerto Rico have signed a pledge to work toward this goal. In addition to improvements in public health, more research is needed to understand all the factors that contribute to premature birth.

## United States

Goal	Rate	Grade
9.6%	11.5%	C



### Status of selected contributing factors

Factor	Previous rate	Latest rate	Status	Recommendation
Uninsured women	21.9%	21.3%	★	Health care before and during pregnancy can help identify and manage conditions that contribute to premature birth. We urge policymakers to expand insurance coverage, including Medicaid, for women of childbearing age, and we urge employers to create workplaces that support maternal and infant health.
Late preterm birth	8.3%	8.1%	★	Most premature babies are born just a few weeks early, but these babies are still at increased risk for death and disability. Some babies may be born early as the result of an induction or c-section that is not medically necessary. We call on hospitals and health professionals to eliminate early elective deliveries before 39 weeks of completed gestation that are not medically necessary.
Women who smoke	22.5%	20.8%	★	Quitting smoking can reduce women's risk of premature birth. We urge policymakers to pursue initiatives that prevent tobacco use and help women quit smoking.

★ = moving in the right direction    n/c = no change    ✗ = moving in the wrong direction

### Preterm birth rates by race and ethnicity

Hispanic 11.7%  
White 10.5%  
Black 16.8%  
Native American 13.6%  
Asian 10.3%

The March of Dimes is concerned about inequities in health and health care that contribute to higher rates of preterm birth among different racial and ethnic groups. We urge state and federal governments to support funding and innovative practices that address the complex medical and social factors underlying racial and ethnic disparities in premature birth.

Race categories (white, black, Native American and Asian) include only women of non-Hispanic ethnicity.

For information on how we are working to reduce premature birth, contact the March of Dimes National Office at (914) 997-4286.