REPRODUCTIVE HEALTH IN GREY BRUCE: 2006–2017



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Suggested Citation:

Grey Bruce Health Unit. (2020). Reproductive Health in Grey Bruce: 2006–2017. Owen Sound: Grey Bruce Health Unit.

TABLE OF CONTENTS

KEY FINDINGS1
ABOUT THE REPORT
GLOSSARY OF TERMS
PRECONCEPTION HEALTH8
FOLIC ACID USE
Folic acid use prior to pregnancy, overall
Folic acid use prior to pregnancy, by age group
HEALTHY PREGNANCIES10
SMOKING DURING PREGNANCY 10
Rate of smoking during pregnancy, overall
Rate of smoking during pregnancy, by age group
ALCOHOL AND SUBSTANCE USE DURING PREGNANCY 12
Rate of alcohol or drug use during pregnancy, overall
Rate of alcohol or drug use during pregnancy, by age group 13
GESTATIONAL WEIGHT GAIN 14
Gestational weight gain below recommended range
Gestational weight gain within recommended range
Gestational weight gain above recommended range
MATERNAL MENTAL HEALTH
MATERNAL MENTAL HEALTH CONCERNS DURING PREGNANCY 17
Maternal mental health concerns during pregnancy, overall 17
Maternal mental health concerns during pregnancy, by age group 18
ANXIETY DURING PREGNANCY 19
Anxiety during pregnancy, overall
Anxiety during pregnancy, by age group
DEPRESSION DURING PREGNANCY 21
Depression during pregnancy, overall
Depression during pregnancy, by age group

HISTORY OF POSTPARTUM DEPRESSION	23
History of postpartum depression, overall	23
History of postpartum depression, by age group	24
REPRODUCTIVE HEALTH OUTCOMES	25
CRUDE BIRTH RATE	
FERTILITY RATE	
Total Hospitalization-based fertility rate	-
Age-specific hospitalization-based fertility rates	
PREGNANCY RATE	
Overall pregnancy rate	
Teen pregnancy rate	
MULTIPLE LIVE BIRTH RATE	
PRETERM BIRTH RATE	
BIRTH WEIGHT RATES	
Low birth weight rate	34
High birth weight rate	35
AGE OF MOTHER AT INFANT'S BIRTH	36
Average age of mother at birth of first infant	36
Average age of mother at infant's birth	
INFANT FEEDING	38
INTENTION TO BREASTFEED	
Intention to breastfeed, overall	
Intention to breastfeed, by age group	
EXCLUSIVE BREASTFEEDING AT HOSPITAL DISCHARGE	
Exclusive breastfeeding at hospital discharge, Overall	40
Exclusive breastfeeding at hospital discharge, by age group	
GROWTH AND DEVELOPMENT	42
ENHANCED WELL-BABY VISIT	
REFERENCES	43

KEY FINDINGS

PRECONCEPTION HEALTH

FOLIC ACID USE (2017)

- 39.6% of Grey Bruce women who gave birth (live birth or stillbirth) took folic acid supplements prior to pregnancy (2017), and this rate was 19% higher than the Ontario rate of 33.4%.
 - Those under age 25 were 42% less likely than other age groups, but still 94% more likely than same-age Ontarians.

HEALTHY PREGNANCIES

SMOKING DURING PREGNANCY (2017)

- 11.1% of Grey Bruce women who gave birth (live birth or stillbirth) smoked during the pregnancy, a rate 56% higher than the Ontario rate of 7.1%.
 - The rate among Grey Bruce women under 25 was 79%
 higher than the group with the next highest rate, women aged 25 to 34.
 - The rate among Grey Bruce women 25 to 34 was 66% higher than the Ontario rate.

ALCOHOL AND SUBSTANCE USE DURING PREGNANCY (2017)

• 7.5% of Grey Bruce women who gave birth (live birth or stillbirth) used alcohol or drugs during pregnancy, a rate 70% higher than

the Ontario rate of 4.4%. This rate has increased by over 108% since just 2013, when it was 3.6%. Ontario's rate has also increased in this time, but only by 37%.

- The rate among Grey Bruce women under 25 was 85%
 higher than the group with the next highest rate, women aged 25 to 34.
- The rate among Grey Bruce women aged 25 to 34 was 68% higher than the Ontario rate.
- The rate among Grey Bruce women aged 35 and over was 106% higher than the Ontario rate.

GESTATIONAL WEIGHT GAIN (2017)

BELOW RECOMMENDED

• 21.0% of Grey Bruce women who were class I obese or lower prepregnancy gained weight below the recommended range.

WITHIN RECOMMENDED

• 30.0% of Grey Bruce women who were class I obese or lower prepregnancy gained weight within the recommended range.

ABOVE RECOMMENDED

• 49.1% of Grey Bruce women who were class I obese or lower prepregnancy gained weight above the recommended range.

MATERNAL MENTAL HEALTH

MATERNAL MENTAL HEALTH CONCERNS DURING PREGNANCY (2017)

- 32.0% of Grey Bruce women who gave birth (live birth or stillbirth) experienced mental health concerns during pregnancy, a rate 78% higher than the Ontario rate of 18.0%. Since 2013, this rate has increased by 36% in Grey Bruce compared to 28% in the province.
 - The rate among Grey Bruce women under 25 was 54% higher than the rate for women aged 25 to 34 in Grey Bruce. It was also 50% higher compared to Ontario women under 25.
 - The rate among Grey Bruce women 25 to 34 was 74% higher compared to Ontario women.
 - The rate among Grey Bruce women 35 and over was 93%
 higher compared to Ontario women.

ANXIETY DURING PREGNANCY (2017)

- 17.4% of Grey Bruce women who gave birth (live birth or stillbirth) experienced anxiety during pregnancy, 50% higher than the Ontario rate of 11.6%. Since 2013, this rate has increased by 79% in Grey Bruce compared to 71% in Ontario.
 - The rate among Grey Bruce women under 25 was 68%
 higher than that of the next highest group, women aged
 25 to 34.
 - The rate among Grey Bruce women aged 25 to 34 was 46% higher compared to Ontario women.

DEPRESSION DURING PREGNANCY (2017)

- 19.5% of Grey Bruce women who gave birth (live birth or stillbirth) experienced depression during pregnancy, 122% higher than the Ontario rate of 8.8%. Since 2013, this rate has increased by 32% in Grey Bruce compared to 19% in the province.
 - The rate among Grey Bruce women under 25 was 65% higher than that of the group with the lowest rate, women aged 25 to 34. It was also 28.3% higher compared to Ontario women.
 - The rate among Grey Bruce women 25 to 34 was 122%
 higher compared to Ontario women. It has also increased
 by 63% since 2014.
 - The rate among Grey Bruce women 35 and over was 167% higher compared to Ontario women. Additionally, after having fallen to just 9.8% in 2016, it more than doubled in 2017.

HISTORY OF POSTPARTUM DEPRESSION (2017)

- 8.4% of Grey Bruce women who gave birth (live birth or stillbirth) had a history of postpartum depression, 110% higher than the Ontario rate of 4.0%.
 - The rate among Grey Bruce women 25 to 34 was 107% higher compared to Ontario women.

REPRODUCTIVE HEALTH OUTCOMES

CRUDE BIRTH RATE (2017)

 9.2 live births occurred per 1000 population in Grey Bruce, similar to the Ontario rate of 9.6 live births per 1000 population. Since 2006, this rate has increased by 14% in Grey Bruce and decreased by 12% in Ontario.

HOSPITALIZATION-BASED FERTILITY RATE (2017)

- 49.9 hospital deliveries occurred per 1000 reproductive-aged (15 to 49) females in Grey Bruce, a rate 24% higher than the Ontario rate of 40.4 hospital deliveries per 1000 reproductive-aged females. Since 2006, this rate has increased by 35% in Grey Bruce, while in Ontario it has decreased by 4%.
 - The rate among Grey Bruce women 20 to 24 was 64%
 higher than the Ontario rate. Since 2006, the Grey Bruce
 rate for this age group has fallen by 26%, while the
 Ontario rate has fallen by 39%.
 - The rate among Grey Bruce women 25 to 29 was the highest among all Grey Bruce age groups, and was 67% higher than the Ontario rate. Since 2006, the Grey Bruce rate for this age group has remained stable, while the Ontario rate has fallen by 25%.
 - The rate among Grey Bruce women 30 to 34 was the second highest among all Grey Bruce age groups, only slightly lower than the 25 to 29 rate, and 13% higher than the Ontario rate. Since 2006, the Grey Bruce rate for this age group has risen by 24%, while the Ontario rate has fallen by 4%.

- The rate among Grey Bruce women 35 to 39 was the third highest among all Grey Bruce age groups, and was 14% lower than the Ontario rate. Since 2006, the Grey Bruce rate for this age group has risen by 62%, while the Ontario rate has risen by 17%.
- The rate among Grey Bruce women 40 to 44 was the second lowest among all Grey Bruce age groups, and was similar to the Ontario rate. Since 2006, the Grey Bruce rate for this age group has risen by 106%, while the Ontario rate has risen by 45%.
- The rate among Grey Bruce women 45 to 49 was the lowest among all Grey Bruce age groups, at least 700% lower than the Ontario rate. Since 2006, the Grey Bruce rate for this age group has remained fairly stable, while the Ontario rate has risen by 167%.

TEEN HOSPITALIZATION-BASED FERTILITY RATE (2017)

 9.8 hospital deliveries occurred per 1000 females aged 15 to 19 in Grey Bruce, a rate 66% higher than the Ontario rate of 5.9 hospital deliveries per 1000 females aged 15 to 19. Since 2006, this rate has fallen by 51% in Ontario, and although it hasn't fallen by a statistically significant amount in Grey Bruce, it appears to be following the same decreasing trends as Ontario.

PREGNANCY RATE (2016)

58.1 pregnancies occurred per 1000 reproductive-aged (15 to 49) females in Grey Bruce, a rate 9% higher than the Ontario rate of 53.1 pregnancies per 1000 reproductive-aged females. Since 2006, this rate has increased by 25% in Grey Bruce, while in Ontario it has fallen by 7%.

TEEN PREGNANCY RATE (2016)

 20.2 pregnancies occurred per 1000 females aged 15 to 19 in Grey Bruce, a rate 38% higher than the Ontario rate of 14.6 pregnancies per 1000 females aged 15 to 19. Since 2006, this rate has fallen by 49% in Ontario, and although it hasn't fallen by a statistically significant amount in Grey Bruce, it appears to be following the same decreasing trend as Ontario.

MULTIPLE LIVE BIRTH RATE (2017)

• 2.9% of live births in Grey Bruce were multiple births, similar to the Ontario rate of 3.2%. Since 2006, this rate has not changed significantly in either Grey Bruce or Ontario.

PRETERM BIRTH RATE (2017)

• 7.4% of live births in Grey Bruce were preterm births, similar to the Ontario rate of 8.1%. Since 2006, this rate has not changed significantly in either Grey Bruce or Ontario.

BIRTH WEIGHTS (2017)

LOW BIRTH WEIGHT RATE

 6.0% of live births in Grey Bruce with a valid birth weight were low birth weight babies, similar to the Ontario rate of 7.0%. Since 2006, this rate has risen by 9% in Ontario, but has remained stable in Grey Bruce.

HIGH BIRTH WEIGHT RATE

 2.0% of live births in Grey Bruce with a valid birth weight were high birth weight babies, similar to the Ontario rate of 1.4%. Since 2006, the rate has fallen by 22% in Ontario, but has remained stable in Grey Bruce.

AGE OF PARENT AT INFANT'S BIRTH (2017)

AVERAGE AGE OF MOTHER AT BIRTH OF FIRST INFANT

 27.8 years is the average age of mothers in Grey Bruce at the birth of their first (live) child, nearly 2 years younger than Ontario's 29.5 years. Since 2007, the average age of Grey Bruce first-time mothers has increased by about 2 years, while the age of Ontario's first-time mothers has increased by about 1.5 years.

AVERAGE AGE OF MOTHER AT INFANT'S BIRTH

29.3 years is the average age of mothers in Grey Bruce at infant's (live) birth, about 1.5 years younger than Ontario's 30.9 years.
 Since 2007, the average age of Grey Bruce mothers at the birth of their infant(s) has increased by almost 1.5 years, while the age of Ontario's mothers has increased by about 1.1 years.

INFANT FEEDING (2017)

INTENTION TO BREASTFEED

- 94.1% of Grey Bruce women who gave birth (live birth or stillbirth) intended to breastfeed, similar to the Ontario rate of 93.9%. Since 2013, both the Grey Bruce rate and the Ontario rate of intention to breastfeed have remained stable.
 - No significant differences in intention to breastfeed were observed at the local level, however Ontario mothers under age 25 were slightly (but statistically significantly) less likely to breastfeed than mothers aged 25 to 34 and mothers aged 35 and over.

EXCLUSIVE BREASTFEEDING AT HOSPITAL DISCHARGE

- 74.8% of Grey Bruce infants discharged by hospitals were exclusively breastfed breast milk while in hospital, 22% higher than the Ontario rate of 61.2%. Since 2013, the Grey Bruce rate has remained stable, while the Ontario rate fell by 2.5% between 2016 and 2017.
 - The rate among Grey Bruce infants of mothers under age 25 was 21% lower than that of the group with the next lowest rate, infants of mothers aged 25 to 34.
 - The rate among Grey Bruce infants of mothers aged 25 to 34 was 23% higher than the Ontario rate for that group.
 - The rate among Grey Bruce infants of mothers aged 35 and over was 35% higher than the Ontario rate for that group.

GROWTH AND DEVELOPMENT

ENHANCED WELL-BABY VISIT (2017)

51.2% of Grey Bruce babies between ages 1 and 2 had received a well-baby visit, 14% lower than the Ontario rate of 59.2%. Since 2010, both the Grey Bruce rate and the Ontario rate have increased, by 56% in Grey Bruce and 42% in Ontario.

ABOUT THE REPORT

This report presents the latest trends in reproductive and maternal health data for the residents of Grey and Bruce Counties alongside those of Ontario. In most cases, the longer-term trends are presented to demonstrate changes over time.

ABOUT RATES

Many of the indicators presented in this report are presented as rates. Because of this, please take note of the denominator of the rate, which will always be presented in the table and figure titles.

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DATA SOURCES

REPRODUCTIVE HEALTH SNAPSHOT (ONTARIO AGENCY FOR HEALTH PROTECTION AND PROMOTION (PUBLIC HEALTH ONTARIO), 2019B)

- Crude birth rate ٠
- Fertility rate •
- Pregnancy rate ٠

- Multiple live birth rate ٠
- Preterm birth rate .
- Low birth weight rate ٠
- High birth weight rate • Average age of mother at birth of first infant
- Average age of mother at birth
- MATERNAL HEALTH SNAPSHOT (ONTARIO AGENCY FOR HEALTH PROTECTION AND PROMOTION (PUBLIC HEALTH ONTARIO), 2019A)
 - Smoking during ٠ pregnancy
 - Alcohol and substance ٠ use during pregnancy
 - Gestational weight gain .

INTELLIHEALTH ONTARIO REPORTS

Enhanced well-baby visit •

- Maternal mental health • concern during pregnancy
- Anxiety during ٠ pregnancy

- Depression during • pregnancy
- History of postpartum depression
- Folic acid use prior to pregnancy

- Intention to breastfeed •
- Exclusive breastfeeding ٠ at hospital discharge

GLOSSARY OF TERMS

Folic acid (folate, vitamin B9): a nutrient essential to the normal development of the spine, brain and skull in utero, especially during the first four weeks of pregnancy.

Live birth: the vaginal or caesarean birth of a newborn which breathes or shows any other evidence of life (heartbeat, umbilical cord pulsation, voluntary muscle movement, etc.) after birth or extraction from its mother. A live birth is not necessarily a viable birth.

Multiple birth: all twins, triplets, quadruplets, quintuplets and higher-order births

Neural tube defect: these include spina bifida (a spinal malformation that exposes the spinal column) and anencephaly (the absence of a major portion of the brain, skull and scalp), and occur when the neural tube fails to close properly during the third and fourth week of pregnancy.

Stillbirth: the vaginal or caesarean birth of a baby which shows no signs of life (as described under live birth, above) from birth or extraction from its mother.

Therapeutic abortion: the deliberate termination of a pregnancy resulting in the death of a fetus or embryo. Also called induced abortion.

PRECONCEPTION HEALTH

FOLIC ACID USE

In order to reduce the risk of neural tube defects, the Society of Obstetricians and Gynecologists of Canada recommends folic acid (folate) supplementation for women planning a pregnancy and throughout pregnancy. Folate (vitamin B9) "[i]s essential to the normal development of the spine, brain and skull of the fetus, especially during the first four weeks of pregnancy" (Public Health Agency of Canada, 2009).

FOLIC ACID USE PRIOR TO PREGNANCY, OVERALL

The rate of **folic acid** use prior to pregnancy is the percentage of women who gave birth (live birth or stillbirth) who reported supplementing with folic acid before the their pregnancy (APHEO Core Indicators Workgroup, 2012).

In 2017, the Grey Bruce rate of **folic acid** use prior to pregnancy was 39.6%, a rate 19% higher than the Ontario rate of 33.4%. While the provincial rate appears to have fallen slightly relative to 2013, the Grey Bruce rate has remained relatively stable.

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Figure 1. Rate of folic acid use prior to pregnancy, overall (%)

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	2013	2014	2015	2016	2017
_	Grey Bruce	9	Ontario $\int 9$	5% Confider	nce Interva

Table 1. Rate of folic acid use prior to pregnancy, overall (%)

	2013	2014	2015	2016	2017
Grey	40.3	44.8	40.8	40.3	39.6
Bruce	(37.0–43.6)	(41.4–48.3)	(37.6–44.0)	(37.0–43.6)	(36.4–42.8)
Ontario	34.8	32.5	33.7	33.5	33.4
	(34.5–35.1)	(32.2–32.8)	(33.4–34.1)	(33.2–33.8)	(33.1–33.7)

FOLIC ACID USE PRIOR TO PREGNANCY, BY AGE GROUP

While there are no clear local rate trends, the rate of **folic acid** supplementation prior to pregnancy is significantly lower among the youngest group of women than among the two older age groups.

In 2017, those under age 25 in Grey Bruce were 42% less likely than those with the next highest likelihood (those 35 and over at 41.7%) to have used **folic acid** prior to pregnancy. Still, they were 94% more likely than Ontarians in the same age group to have used **folic acid** during pregnancy. Those in the 25 to 34 age group in Grey Bruce were 23% more likely than Ontarians in the same age group to have used **folic acid** prior to pregnancy.



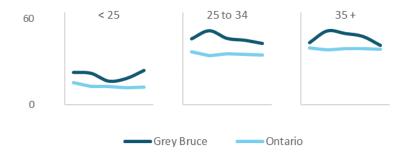


Table 2. Rates of folic acid use prior to pregnancy in Grey Bruce, by age group (%)

	2013	2014	2015	2016	2017
< 25	22.9	22.3	16.7	18.6	24.3
	(17.9–27.9)	(17.4–27.2)	(12.1–21.2)	(13.7–23.6)	(18.3–30.3)
25 to 34	46.3	52.0	46.6	45.3	43.0
	(41.9–50.7)	(47.4–56.7)	(42.3–50.8)	(41.1–49.5)	(39.0–47.1)
35 +	43.6	51.8	50.0	48.0	41.7
	(33.6–53.7)	(41.7–61.9)	(40.0–60.0)	(37.7–58.3)	(33.5–49.8)

Table 3. Rates of folic acid use prior to pregnancy in Ontario, by age group (%)

	2013	2014	2015	2016	2017
< 25	15.5	12.8	12.7	12.2	12.5
	(14.9–16.1)	(12.3–13.4)	(12.1–13.2)	(11.6–12.7)	(12.0–13.1)
25 to 34	37.4	34.7	36.0	35.5	35.1
	(37.0–37.8)	(34.3–35.1)	(35.6–36.4)	(35.1–35.9)	(34.7–35.5)
35 +	40.0	38.4	39.5	39.3	38.9
	(39.3–40.8)	(37.7–39.2)	(38.8–40.2)	(38.6–40.0)	(38.3–39.6)

HEALTHY PREGNANCIES

SMOKING DURING PREGNANCY

RATE OF SMOKING DURING PREGNANCY, OVERALL

The overall rate of smoking during pregnancy is the percentage of women who gave birth that reported having smoked at any time during the pregnancy at hospital admission for that birth (whether the birth was a **live birth** or **stillbirth**) (APHEO Core Indicators Workgroup, 2013g).

In 2017, the Grey Bruce overall rate of smoking during pregnancy was 11.1%, 56% higher than the Ontario rate of 7.1%. Since 2013, the overall rate of smoking during pregnancy has fallen by 1 percentage point in Ontario, a statistically significant amount, while in Grey Bruce there is a decreasing but not statistically significant trend.



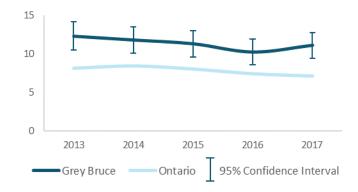


Table 4. Rate of smoking during pregnancy: overall (%)

	2013	2014	2015	2016	2017
Grey	12.3	11.8	11.3	10.2	11.1
Bruce	(10.5–14.1)	(10.1–13.5)	(9.6–13.0)	(8.6–11.9)	(9.4–12.7)
Ontario	8.1	8.4	8.0	7.4	7.1
	(8.0–8.3)	(8.2–8.5)	(7.8–8.1)	(7.3–7.6)	(6.9–7.2)

RATE OF SMOKING DURING PREGNANCY, BY AGE GROUP

Ontario's age-specific rates are decreasing among the youngest group, but stable among the other two. Grey Bruce age-specific rates appear to be decreasing among the youngest and oldest groups and possibly increasing among the middle age group, these trends are not statistically significant.

In 2017, the Grey Bruce rate of smoking during pregnancy was 79% higher among women under 25 than the women aged 25 to 34, who had the next highest rate with 10.3%. Also, while Grey Bruce women in the youngest and oldest age groups were no more likely to have smoked during pregnancy in 2017 than Ontario women in those age groups, those in the 25 to 34 age group were 66% more likely than Ontarians to have smoked during pregnancy.

Figure 4. Trends in rates of smoking during pregnancy, by age group (%)

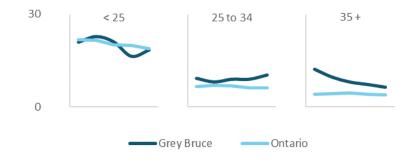


Table 5. Rates of smoking during pregnancy in Grey Bruce, by age group (%)

	2013	2014	2015	2016	2017
< 25	20.9	22.7	21.0	16.4	18.4
	(16.1–25.6)	(17.8–27.6)	(16.0–26.0)	(11.8–21.0)	(13.3–23.6)
25 to 34	9.2	8.0	8.9	8.9	10.3
	(7.2–11.1)	(6.2–9.8)	(7.0–10.7)	(7.1–10.8)	(8.3–12.3)
35 +	12.2	9.6	8.0	7.2	6.3
	(7.0–17.4)	(5.3–14.0)	(4.1–11.9)	(3.3–11.1)	(3.1–9.4)

Table 6. Rates of smoking during pregnancy in Ontario, by age group (%)

	2013	2014	2015	2016	2017
< 25	21.8	21.6	20.1	19.8	18.8
	(21.1–22.4)	(20.9–22.3)	(19.4–20.8)	(19.1–20.5)	(18.1–19.5)
25 to 34	6.6	6.9	6.7	6.2	6.2
	(6.4–6.7)	(6.7–7.0)	(6.5–6.9)	(6.1–6.4)	(6.1–6.4)
35 +	4.0	4.3	4.5	4.1	3.9
	(3.8–4.3)	(4.1–4.6)	(4.2–4.7)	(3.8–4.3)	(3.7–4.1)

ALCOHOL AND SUBSTANCE USE DURING PREGNANCY

RATE OF ALCOHOL OR DRUG USE DURING PREGNANCY, OVERALL

The overall rate of alcohol or drug use during pregnancy is the percentage of women who gave birth that reported having using drugs, substances or alcohol any time during the pregnancy at hospital admission for that birth (whether the birth was a **live birth** or **stillbirth**) (APHEO Core Indicators Workgroup, 2017b).

In 2017, the Grey Bruce overall rate of alcohol or drug use during pregnancy was 7.5%, 70% higher than the Ontario rate of 4.4%. Since 2013, the Grey Bruce overall rate of alcohol or drug use during pregnancy has increased by 108%, while in Ontario it has increased by just 37%.

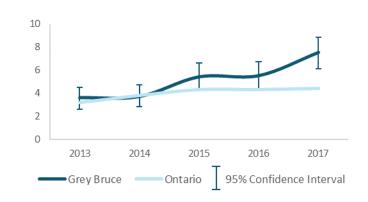


Table 7. Rate of alcohol or drug use during pregnancy: overall (%)

	2013	2014	2015	2016	2017
Grey	3.6	3.7	5.4	5.5	7.5
Bruce	(2.6–4.5)	(2.8–4.7)	(4.3–6.6)	(4.4–6.7)	(6.1–8.8)
Ontario	3.2	3.8	4.3	4.3	4.4
	(3.1–3.3)	(3.7–3.9)	(4.1–4.4)	(4.2–4.4)	(4.3–4.5)

Figure 5. Rate of alcohol or drug use during pregnancy: overall (%)

RATE OF ALCOHOL OR DRUG USE DURING PREGNANCY, BY AGE GROUP

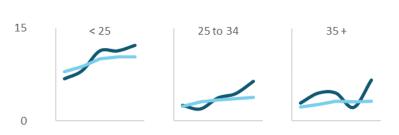
Overall rates of alcohol or drug use during pregnancy in Grey Bruce and Ontario are increasing among all age groups, although the increase is not statistically significant among Grey Bruce mothers aged 35+.

In 2017, the rate of alcohol or drug use during pregnancy among women under 25 was 85% higher than the group with the next highest rate, women 35 and older at 6.6%.

Grey Bruce women in the two highest age groups had significantly higher rates than their Ontario counterparts in 2017, with those aged 25 to 34 having a 68% higher rate than Ontarians, and those aged 35 and over having a 106% higher rate than Ontarians.

Table 8. Rates of alcohol or drug use during pregnancy in Grey Bruce, by age group (%)

	2013	2014	2015	2016	2017
< 25	6.8	8.1	11.3	11.3	12.2
	(4.1–9.5)	(5.2–11.0)	(7.7–15.0)	(7.5–15.1)	(8.1–16.4)
25 to 34	2.5	1.9	3.7	4.4	6.4
	(1.5–3.5)	(1.0–2.8)	(2.5–4.9)	(3.1–5.7)	(4.9–8.0)
35 +	2.9	4.5	4.5	2.2	6.6
	(0.4–5.5)	(1.6–7.5)	(1.6–7.4)	(0.0–4.4)	(3.3–9.8)



Grey Bruce

Figure 6. Trends in rates of alcohol or drug use during pregnancy, by age group (%)

Table 9. Rates of alcohol or drug use during pregnancy in Ontario, by age group (%)

Ontario

	2013	2014	2015	2016	2017
< 25	8.0	8.8	10.0	10.3	10.3
	(7.6–8.4)	(8.4–9.2)	(9.6–10.5)	(9.8–10.8)	(9.8–10.9)
25 to 34	2.4	3.1	3.4	3.6	3.8
	(2.3–2.5)	(3.0–3.2)	(3.3–3.6)	(3.4–3.7)	(3.7–3.9)
35 +	2.2	2.7	3.2	3.1	3.2
	(2.0–2.4)	(2.5–2.9)	(3.0–3.4)	(2.9–3.3)	(3.0–3.4)

GESTATIONAL WEIGHT GAIN

Recommended maternal weight gain is calculated for pregnant women with a pre-pregnancy BMI below 35 (class I obese and lower) (APHEO Core Indicators Workgroup, 2016b). Among women with **multiple birth** pregnancies, it should not be calculated if the BMI is below 18.5, however there is no way to filter these data from the BORN Public Health Cube, from which Public Health Ontario drew the data for this analysis. These cases would be few, however, and should not significantly skew the data.

Data for the following three concepts are not presented by age group since rates were too low to report for multiple year/age/geography combinations.

GESTATIONAL WEIGHT GAIN BELOW RECOMMENDED RANGE

The rate of gestational weight gain below the recommended range is the percentage of women who were class I obese or lower pre-pregnancy who gained weight that was lower than the recommended range.

In 2017, the Grey Bruce rate of below-recommended gestational weight gain was 21.0%, similar to the Ontario rate of 22.7%. The Grey Bruce rate has been stable between 2014 and 2017, while the Ontario rate has risen by two full percentage points in the same time.

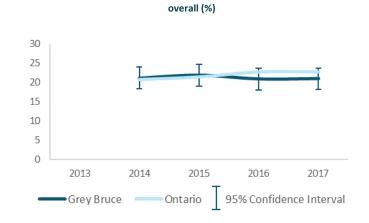


Figure 7. Women who gained less weight than recommended during pregnancy:

Table 10. Women who gained less weight than recommended during pregnancy: overall (%)

	2013	2014	2015	2016	2017
Grey Bruce	N/A	21.1 (18.3–24.0)	21.9 (19.0–24.7)	20.9 (18.0–23.7)	21.0 (18.2–23.7)
Ontario	N/A	20.7 (20.4–21.0)	21.4 (21.1–21.7)	22.7 (22.4–23.0)	22.7 (22.4–23.0)

GESTATIONAL WEIGHT GAIN WITHIN RECOMMENDED RANGE

The rate of gestational weight gain within the recommended range is the percentage of women who were class I obese or lower pre-pregnancy who gained weight within the recommended range.

In 2017, the Grey Bruce rate of within-recommended gestational weight gain was 30.0%, similar to the Ontario rate of 31.8%. Both the Grey Bruce rate and the Ontario rate have remained stable between 2014 and 2017.

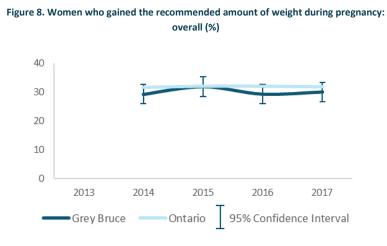


Table 11. Women who gained the recommended amount of weight during pregnancy: overall (%)

	2013	2014	2015	2016	2017
Grey Bruce	N/A	29.2 (25.9–32.5)	31.7 (28.3–35.2)	29.3 (25.9–32.7)	30.0 (26.6–33.3)
Ontario	N/A	31.6 (31.2–31.9)	32.0 (31.7–32.4)	32.0 (31.7–32.3)	31.8 (31.5–32.2)

GESTATIONAL WEIGHT GAIN ABOVE RECOMMENDED RANGE

The rate of gestational weight gain above the recommended range is the percentage of women who were class I obese or lower pre-pregnancy who gained more weight than the recommended range.

In 2017, the Grey Bruce rate of above-recommended gestational weight gain was 49.1%, similar to the Ontario rate of 45.5%. Both the Grey Bruce rate and the Ontario rate have remained stable between 2014 and 2017.

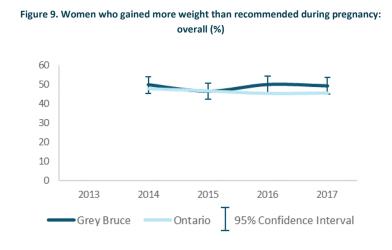


Table 12. Women who gained more weight than recommended during pregnancy: overall (%)

	2013	2014	2015	2016	2017
Grey Bruce	N/A	49.7 (45.3–54.0)	46.4 (42.3–50.6)	49.8 (45.4–54.3)	49.1 (44.8–53.4)
Ontario	N/A	47.7 (47.3–48.2)	46.6 (46.1–47.0)	45.3 (44.9–45.7)	45.5 (45.1–45.9)

MATERNAL MENTAL HEALTH

MATERNAL MENTAL HEALTH CONCERNS DURING PREGNANCY

The rate of maternal mental health concerns during pregnancy is the percentage of women who gave birth (**live birth** or **stillbirth**) who experienced any mental health concern during pregnancy, including anxiety, depression, addiction, bipolar disorder, schizophrenia, other mental health concerns, or a history of postpartum depression (APHEO Core Indicators Workgroup, 2016a).

MATERNAL MENTAL HEALTH CONCERNS DURING PREGNANCY, OVERALL

In 2017, the Grey Bruce rate of maternal mental health concerns was 32.0%, 78% higher than the Ontario rate of 18.0%. Since 2013, this rate has increased at both the local (by 36%) and provincial (by 28%) level.

40 30 20 10 0 2013 2014 2015 2016 2017 95% Confidence Interval

Figure 10. Maternal mental health concerns during pregnancy: overall (%)

Table 13. Maternal mental health concerns during pregnancy: overall (%)

	2013	2014	2015	2016	2017
Grey	23.5	24.5	28.5	25.8	32.0
Bruce	(21.0–26.0)	(22.0–26.9)	(25.8–31.1)	(23.3–28.4)	(29.1–34.8)
Ontario	14.1	14.7	15.9	16.9	18.0
	(13.9–14.3)	(14.5–14.9)	(15.6–16.1)	(16.7–17.1)	(17.8–18.3)

MATERNAL MENTAL HEALTH CONCERNS DURING PREGNANCY, BY AGE GROUP

Overall rates of maternal mental health concerns during pregnancy in Grey Bruce and Ontario are increasing among all age groups except women aged 35 and over in Grey Bruce. The most drastic increase is observed in the youngest age groups (women under aged 25).

In 2017, Grey Bruce women under 25 were 54% more likely to have maternal mental health concerns during pregnancy than women aged 25 to 34 (44.5% compared to 28.9%). All age groups in Grey Bruce were more likely to have maternal mental health concerns during pregnancy than Ontario women: 50% more likely for women under 25 (44.5% compared to 29.7%), 74% more likely for women aged 25 to 34 (28.9% compared to 16.6%), and 93% more likely for women aged 35 and over (31.0% compared to 16.1%).

$\begin{array}{c} 50 \\ 0 \end{array}$

Table 15. Rates of maternal mental health concerns during pregnancy in Ontario, by age group (%)

	2013	2014	2015	2016	2017
< 25	20.8	22.6	24.4	26.7	29.7
	(20.2–21.5)	(21.9–23.2)	(23.6–25.1)	(25.9–27.5)	(28.9–30.6)
25 to 34	12.9	13.5	14.6	15.6	16.6
	(12.7–13.1)	(13.2–13.7)	(14.3–14.8)	(15.4–15.9)	(16.4–16.9)
35 +	13.4	13.5	14.5	15.1	16.1
	(12.9–13.8)	(13.1–13.9)	(14.1–14.9)	(14.6–15.5)	(15.6–16.5)

Table 14. Rates of maternal mental health concerns during pregnancy in Grey Bruce, by age group (%)

	2013	2014	2015	2016	2017
< 25	26.9	29.5	35.3	36.1	44.5
	(21.5–32.3)	(23.9–35.0)	(28.9–41.8)	(29.3–42.9)	(36.6–52.4)
25 to 34	21.4	21.4	26.2	23.5	28.9
	(18.4–24.3)	(18.5–24.3)	(23.0–29.3)	(20.5–26.5)	(25.6–32.2)
35 +	28.2	30.0	28.9	21.9	31.0
	(20.2–36.2)	(22.4–37.6)	(21.4–36.3)	(15.1–28.6)	(24.0–38.0)

Figure 11. Trends in maternal mental health concerns during pregnancy, by age group (%)

ANXIETY DURING PREGNANCY

The rate of anxiety during pregnancy is the percentage of women who gave birth (**live birth** or **stillbirth**) who experienced anxiety during pregnancy (APHEO Core Indicators Workgroup, 2016a).

ANXIETY DURING PREGNANCY, OVERALL

In 2017, the Grey Bruce rate of anxiety during pregnancy was 17.4%, 50% higher than the Ontario rate of 11.6%. At both the local and provincial level, rates of anxiety during pregnancy have increased since 2013 (79% higher in Grey Bruce, 71% higher in Ontario).



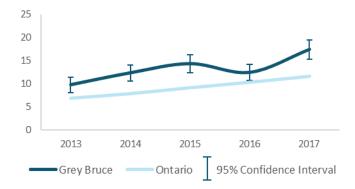


Table 16. Rate of anxiety during pregnancy: overall (%)

	2013	2014	2015	2016	2017
Grey	9.7	12.3	14.3	12.4	17.4
Bruce	(8.1–11.3)	(10.5–14.0)	(12.4–16.2)	(10.7–14.2)	(15.3–19.4)
Ontario	6.8	7.8	9.1	10.3	11.6
	(6.6–6.9)	(7.6–7.9)	(8.9–9.3)	(10.1–10.5)	(11.4–11.8)

ANXIETY DURING PREGNANCY, BY AGE GROUP

Overall rates of anxiety during pregnancy in Grey Bruce and Ontario are increasing among all age groups, but this increase is not statistically significant among women aged 35 and over in Grey Bruce. The most drastic increase is observed in the youngest age groups (women under 25) in both geographies.

In 2017, Grey Bruce women under 25 were 68% more likely than those with the next highest rate, women aged 25 to 34, to have anxiety during pregnancy (26.5% compared to 15.8%).

Grey Bruce women in the 25 to 34 age group were 46% more likely to have anxiety during pregnancy in 2017 than Ontario women in that age group (15.8% compared to 10.8%).

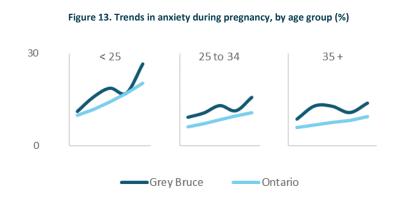


Table 17. Rates of anxiety during pregnancy in Grey Bruce, by age group (%)

	2013	2014	2015	2016	2017
< 25	11.2	15.9	18.7	17.1	26.5
	(7.7–14.7)	(11.9–20.0)	(14.1–23.4)	(12.4–21.7)	(20.4–32.6)
25 to 34	9.3	10.7	13.1	11.4	15.8
	(7.3–11.2)	(8.6–12.8)	(10.9–15.3)	(9.3–13.4)	(13.4–18.3)
35 +	8.8	13.0	12.9	10.9	13.9
	(4.4–13.3)	(8.0–18.0)	(8.0–17.9)	(6.1–15.7)	(9.2–18.5)

Table 18. Rates of anxiety during pregnancy in Ontario, by age group (%)

	2013	2014	2015	2016	2017
< 25	10.0	11.8	14.3	17.0	20.3
	(9.5–10.4)	(11.3–12.3)	(13.7–14.9)	(16.4–17.6)	(19.6–21.0)
25 to 34	6.3	7.3	8.5	9.7	10.8
	(6.1–6.4)	(7.1–7.5)	(8.3–8.7)	(9.5–9.9)	(10.6–11.0)
35 +	6.1	6.8	7.7	8.3	9.6
	(5.8–6.4)	(6.5–7.1)	(7.4–8.0)	(8.0–8.7)	(9.2–9.9)

20

DEPRESSION DURING PREGNANCY

The rate of depression during pregnancy is the percentage of women who gave birth (**live birth** or **stillbirth**) who experienced depression during pregnancy (APHEO Core Indicators Workgroup, 2016a).

DEPRESSION DURING PREGNANCY, OVERALL

In 2017, the Grey Bruce rate of depression during pregnancy was 19.5%, 122% higher than the Ontario rate of 8.8%. At both the local and provincial level, the rate has increased since 2013: in Grey Bruce it increased by 32%, while in Ontario it increased by 19%).



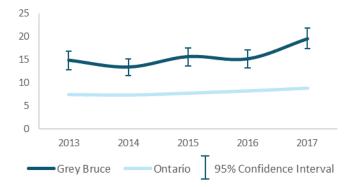


Table 19. Rate of depression during pregnancy: overall (%)

	2013	2014	2015	2016	2017
Grey	14.8	13.3	15.6	15.1	19.5
Bruce	(12.8–16.8)	(11.5–15.1)	(13.6–17.5)	(13.1–17.0)	(17.3–21.7)
Ontario	7.4	7.3	7.7	8.2	8.8
	(7.2–7.5)	(7.2–7.5)	(7.5–7.8)	(8.1–8.4)	(8.6–9.0)

DEPRESSION DURING PREGNANCY, BY AGE GROUP

Overall rates of depression during pregnancy in Grey Bruce and Ontario are increasing among all age groups except the 35 and over age group in Grey Bruce, whose rates fell from 2013 to 2016, but abruptly doubled from 2016 to 2017. Besides this increase, the most dramatic increase is observed in the youngest age group (women under aged 25) in both geographies.

In 2017, Grey Bruce women under 25 were 65% more likely than those with the lowest rate, women 25 to 34, to have depression during pregnancy (28.3% compared to 17.1%).

Across all age groups in 2017, Grey Bruce women had higher rates than Ontario women: 61% higher for women under 25 (28.3% compared to 17.6%), 122% higher for women 25 to 34 (17.1% compared to 7.7%), and 167% higher for women 35 and over (20.0% compared to 7.5%).

Table 20. Rates of depression during pregnancy in Grey Bruce, by age group (%)

	2013	2014	2015	2016	2017
< 25	18.2	18.1	22.7	23.7	28.3
	(13.8–22.6)	(13.8–22.4)	(17.5–27.8)	(18.2–29.3)	(22.0–34.6)
25 to 34	12.7	10.5	13.2	13.4	17.1
	(10.4–14.9)	(8.4–12.5)	(11.0–15.5)	(11.2–15.7)	(14.6–19.6)
35 +	19.4	18.0	15.9	9.8	20.0
	(12.8–26.0)	(12.1–23.9)	(10.4–21.4)	(5.3–14.4)	(14.4–25.6)

Figure 15. Trends in depression during pregnancy, by age group (%)

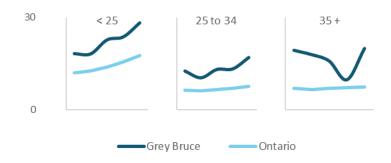


Table 21. Rates of depression during pregnancy in Ontario, by age group (%)

	2013	2014	2015	2016	2017
< 25	12.0	12.7	13.8	15.5	17.6
	(11.5–12.5)	(12.2–13.2)	(13.3–14.4)	(14.9–16.1)	(16.9–18.2)
25 to 34	6.4	6.3	6.7	7.1	7.7
	(6.2–6.6)	(6.2–6.5)	(6.5–6.8)	(6.9–7.3)	(7.5–7.9)
35 +	7.1	6.7	7.0	7.3	7.5
	(6.8–7.4)	(6.4–7.0)	(6.7–7.3)	(7.0–7.6)	(7.2–7.8)

HISTORY OF POSTPARTUM DEPRESSION

The rate of history of postpartum depression is the percentage of women who gave birth (live birth or stillbirth) who had a history of postpartum depression (APHEO Core Indicators Workgroup, 2016a).

HISTORY OF POSTPARTUM DEPRESSION, OVERALL

In 2017, the Grey Bruce rate of history of postpartum depression was 8.4%, 110% higher than the Ontario rate of 4.0%. At the provincial level the rate has increased by 10% since 2013, however in Grey Bruce the rate has been stable since 2013.

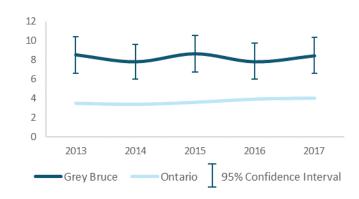


Table 22. History o	f postpartum d	lepression: overall	(%)	1
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	2013	2014	2015	2016	2017
Grey	8.5	7.8	8.6	7.8	8.4
Bruce	(6.6–10.4)	(6.0–9.6)	(6.7–10.5)	(6.0–9.7)	(6.6–10.3)
Ontario	3.5	3.4	3.6	3.9	4.0
	(3.4–3.6)	(3.3–3.6)	(3.4–3.7)	(3.7–4.0)	(3.9–4.2)

Figure 16. History of postpartum depression: overall (%)

HISTORY OF POSTPARTUM DEPRESSION, BY AGE GROUP

Trends in rates of history of postpartum depression in Grey Bruce and Ontario differ significantly among age groups. Among those under age 25 in Grey Bruce, the rates have fluctuated since 2013, but not to a statistically significant degree. Among those aged 25 to34, rates are fairly stable, while among those aged 35 and over in Grey Bruce there is a falling trend in rates, although not yet a statistically significant one.

In 2017, Grey Bruce women aged 25 to 34 were more that twice as likely (107% more likely) than their Ontario counterparts to have a history of postpartum depression (8.3% compared to 4.0%).

Table 23. Rates of history of postpartum depression in Grey Bruce, by age group (%)

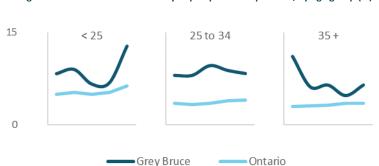


Figure 17. Trends in rates of history of postpartum depression, by age group (%)

Table 24. Rates of history of postpartum depression in Ontario, by age group (%)

	2013	2014	2015	2016	2017
< 25	8.3	9.0	6.6	6.8	12.8
	(3.6–13.0)	(3.9–14.0)	(2.3–10.9)	(2.3–11.2)	(6.1–19.6)
25 to 34	8.0	8.0	9.6	8.8	8.3
	(5.8–10.2)	(5.8–10.2)	(7.2–11.9)	(6.5–11.0)	(6.1–10.5)
35 +	11.1	6.2	6.5	4.8	6.5
	(5.3–16.9)	(2.4–10.1)	(2.5–10.5)	(1.2–8.3)	(2.8–10.1)

	2013	2014	2015	2016	2017
< 25	5.0	5.3	5.0	5.3	6.3
	(4.4–5.5)	(4.8–5.9)	(4.4–5.6)	(4.7–5.9)	(5.6–6.9)
25 to 34	3.5	3.3	3.5	3.9	4.0
	(3.3–3.7)	(3.2–3.5)	(3.4–3.7)	(3.7–4.0)	(3.8–4.2)
35 +	3.0	3.1	3.2	3.5	3.5
	(2.8–3.3)	(2.8–3.3)	(3.0–3.4)	(3.2–3.7)	(3.3–3.8)

REPRODUCTIVE HEALTH OUTCOMES

CRUDE BIRTH RATE

The crude birth rate is the number of **live births** per 1000 population (APHEO Core Indicators Workgroup, 2013b). This rate is influenced by the age distribution of a population—it tends to be higher in populations with more women of childbearing age (aged 15 to 49).

The 2017 Grey Bruce crude birth rate was 9.2 **live births** per 1000 population, similar to the Ontario rate of 9.6 **live births** per 1000 population. Since 2006, the Grey Bruce crude birth rate has increased by 14% while the Ontario rate has decreased by 12%.

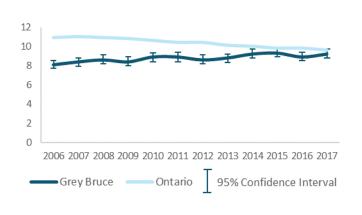


Figure 18. Crude birth rate (per 1000 population)

Table 25. Crude birth rate (per 1000 population)

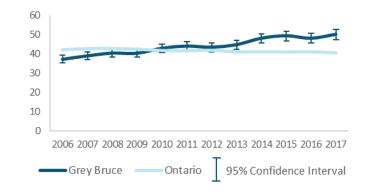
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Grey	8.1	8.4	8.6	8.4	8.9	8.9	8.6	8.8	9.2	9.3	8.9	9.2
Bruce	(7.7–8.5)	(7.9–8.8)	(8.2–9.1)	(8.0–8.9)	(8.4–9.3)	(8.4–9.4)	(8.2–9.1)	(8.3–9.2)	(8.8–9.7)	(8.9–9.8)	(8.5–9.4)	(8.8–9.7)
Ontario	10.9	11.0	10.9	10.8	10.6	10.4	10.4	10.1	10.0	9.8	9.8	9.6
	(10.9–11.0)	(11.0–11.1)	(10.9–11.0)	(10.8–10.9)	(10.5–10.6)	(10.4–10.5)	(10.3–10.4)	(10.0–10.1)	(9.9–10.0)	(9.8–9.9)	(9.7–9.8)	(9.5–9.6)

FERTILITY RATE

Fertility rates are usually the number of **live births** per 1000 reproductive-aged females (those aged 15 to 49) in a population (APHEO Core Indicators Workgroup, 2013c). They can also be presented for specific age groups (ibid.). When the indicator is derived using data from inpatient hospital discharges, the indicator becomes the number of *deliveries resulting in at least 1 live birth*, which undercounts **multiple births** (ibid.). Thus, the actual fertility rate is marginally higher than the estimates presented in this section. When presenting fertility rates based on hospitalizations where sub-analysis for mother's age is required, counts based on neonatal cases are not possible, as the mother's age is not saved in the child's record.

TOTAL HOSPITALIZATION-BASED FERTILITY RATE

The 2017 Grey Bruce total hospitalization-based fertility rate was 49.9 deliveries resulting in at least 1 **live birth** per 1000 reproductive-aged females, which was 24% higher than the Ontario rate of 40.4 per 1000 reproductive-aged females. While the Ontario total hospitalization-based fertility rate has remained relatively stable since 2006, the Grey Bruce total hospitalization-based fertility rate has increased by 35% since 2006. By contrast, the Ontario total hospitalization-based fertility rate has fallen by 4% since 2006.





	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Grey Bruce	37.1 (35.1–39.2)	38.9 (36.8–40.9)	40.3 (38.2–42.5)	40.2 (38.1–42.4)	42.8 (40.5–45.0)	43.9 (41.6–46.2)	43.3 (41.0–45.5)	44.6 (42.2–46.9)	47.9 (45.4–50.3)	49.2 (46.7–51.7)	47.9 (45.5–50.4)	49.9 (47.3–52.4)
Bruce	(33.1–39.2)	(30.8-40.9)	(38.2-42.3)	(38.1-42.4)	(40.5–45.0)	(41.0-40.2)	(41.0-45.5)	(42.2–40.9)	(45.4–50.3)	(40.7–31.7)	(43.3–30.4)	(47.3–32.4)
Ontario	42.1 (41.8–42.3)	42.7 (42.4–42.9)	42.7 (42.5–43.0)	42.4 (42.2–42.6)	41.7 (41.5–41.9)	41.6 (41.4–41.8)	41.8 (41.5–42.0)	41.0 (40.8–41.2)	41.0 (40.8–41.2)	40.9 (40.7–41.2)	41.0 (40.8–41.2)	40.4 (40.2–40.6)

Table 26. Total hospitalization-based fertility rate (per 1000 females aged 15 to 49)

AGE-SPECIFIC HOSPITALIZATION-BASED FERTILITY RATES

Grey Bruce age-specific hospitalization-based fertility rates are increasing among women in their thirties (up 24% from 2006 rate for women 30 to 34 and up 62% from the 2006 rate for women 35 to 39), and **decreasing** among women aged 20 to 24 (down 26% from 2006 rate). While Ontario age-specific hospitalization-based fertility rates have also decreased (down 39%) among women aged 20 to 24, among women in their thirties rates have remained fairly stable.

Grey Bruce age-specific hospitalization-based fertility rates among women aged 25 to 29 are stable.

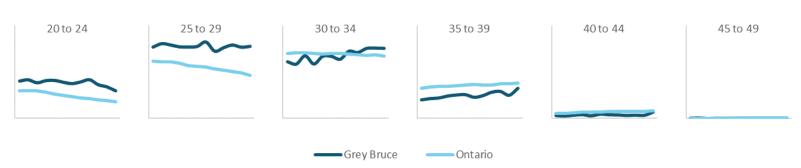


Figure 20. Age-specific hospitalization-based fertility rate trends (per 1000 females, by five-year age group)

The highest fertility rates among Grey Bruce women in 2017 were observed in the 25 to 29 (116.1 per 1000) and 30 to 34 (113.5 per 1000) age groups.

In 2017, the three youngest non-teenager age groups had significantly higher rates than Ontario women, with women age 20 to 24 64% higher (44.9 compared to 27.3 per 1000), women age 25 to 29 67% higher (116.1 compared to 69.5 per 1000), and women age 30 to 34 13% higher (113.5 compared to 100.5 per 1000). By contrast, the three oldest age groups had significantly lower rates than Ontario women, with women age 35 to 39 14% lower (48.9 compared to 56.8 per 1000), women age 40 to 44 11% lower (10.7 compared to 12.0 per 1000), and women age 45 to 49 more than 8 times as low (0.0 compared to 0.8 per 1000).

	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
20–24	60.8	62.8	58.0	61.5	61.9	58.9	56.7	59.4	63.0	54.9	51.4	44.9
	(53.7–67.9)	(55.6–69.9)	(51.2–64.8)	(54.5–68.5)	(54.9–68.9)	(52.0–65.8)	(49.9–63.4)	(52.6–66.2)	(56.0–70.1)	(48.3–61.5)	(45.0–57.7)	(38.9–50.9)
25–29	114.9	120.6	118.3	115.3	114.9	115.9	123.3	108.0	113.9	118.3	114.7	116.1
	(104.0–125.8)	(109.7–131.5)	(107.6–128.9)	(104.9–125.8)	(104.6–125.2)	(105.5–126.3)	(112.6–134.0)	(98.0–118.0)	(103.7–124.1)	(108.1–128.6)	(104.7–124.6)	(106.1–126.0)
30–34	91.7	88.0	101.4	88.1	100.6	100.5	95.9	108.8	106.6	113.4	113.9	113.5
	(81.9–101.4)	(78.3–97.6)	(91.2–111.7)	(78.6–97.6)	(90.5–110.7)	(90.7–110.3)	(86.4–105.4)	(98.7–118.8)	(96.7–116.5)	(103.2–123.6)	(103.7–124.1)	(103.3–123.6)
35–39	30.1	32.2	33.2	36.4	38.0	38.6	34.3	37.0	42.5	43.8	37.6	48.9
	(25.0–35.2)	(26.9–37.5)	(27.7–38.7)	(30.6–42.1)	(32.0–44.0)	(32.4–44.8)	(28.4–40.2)	(30.8–43.1)	(35.9–49.1)	(37.1–50.4)	(31.6–43.6)	(42.1–55.7)
40–44	5.2	4.5	5.7	6.6	4.8	7.4	6.4	6.2	5.3	5.8	5.5	10.7
	(3.4–7.1)	(2.7–6.2)	(3.7–7.7)	(4.3–8.8)	(2.8–6.8)	(4.8–9.9)	(4.1–8.8)	(3.8–8.5)	(3.1–7.6)	(3.4–8.1)	(3.2–7.9)	(7.4–14.0)
45–49	0.3	0.6	0.0	0.2	0.2	0.2	0.5	0.2	0.2	0.2	0.0	0.0
	(0.0–0.7)	(0.0–1.2)	(0.0–0.0)	(0.0–0.5)	(0.0–0.5)	(0.0–0.5)	(0.0–1.1)	(0.0–0.5)	(0.0–0.6)	(0.0–0.6)	(0.0–0.0)	(0.0–0.0)

Table 27. Age-specific (excluding teens) hospitalization-based fertility rates in Grey Bruce (per 1000 females, by five-year age group)

Table 28. Age-specific (excluding teens) hospitalization-based fertility rates in Ontario (per 1000 females, by five-year age group)

	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
20–24	44.7	45.1	44.2	42.8	39.5	37.5	35.5	32.9	31.9	30.3	29.1	27.3
	(44.0–45.3)	(44.5–45.8)	(43.6–44.8)	(42.2–43.4)	(38.9–40.1)	(36.9–38.0)	(34.9–36.0)	(32.3–33.4)	(31.4–32.4)	(29.8–30.8)	(28.6–29.6)	(26.8–27.8)
25–29	92.2	91.0	91.2	88.7	85.2	84.2	83.0	79.7	77.9	75.6	73.3	69.5
	(91.2–93.1)	(90.1–91.9)	(90.3–92.1)	(87.8–89.6)	(84.3–86.0)	(83.3–85.0)	(82.2–83.9)	(78.9–80.5)	(77.1–78.7)	(74.8–76.3)	(72.6–74.1)	(68.8–70.3)
30–34	104.3	106.0	105.5	105.2	104.2	104.4	104.8	103.9	103.2	102.0	103.2	100.5
	(103.3–105.2)	(105.0–107.0)	(104.5–106.4)	(104.2–106.1)	(103.3–105.2)	(103.5–105.4)	(103.8–105.7)	(102.9–104.8)	(102.2–104.1)	(101.1–102.9)	(102.3–104.1)	(99.7–101.4)
35–39	48.6	51.3	52.0	52.3	53.2	53.5	54.5	53.8	53.9	55.5	55.8	56.8
	(48.0–49.3)	(50.6–51.9)	(51.4–52.7)	(51.7–53.0)	(52.5–53.9)	(52.9–54.2)	(53.9–55.2)	(53.1–54.5)	(53.3–54.6)	(54.9–56.2)	(55.1–56.4)	(56.2–57.5)
40–44	8.3	8.5	9.2	9.8	10.5	10.8	11.2	10.9	11.1	11.5	11.4	12.0
	(8.0–8.5)	(8.3–8.8)	(8.9–9.5)	(9.5–10.1)	(10.2–10.8)	(10.5–11.1)	(10.9–11.5)	(10.6–11.2)	(10.8–11.4)	(11.2–11.8)	(11.1–11.7)	(11.6–12.3)
45–49	0.3	0.4	0.4	0.5	0.4	0.6	0.6	0.6	0.7	0.7	0.7	0.8
	(0.3–0.4)	(0.4–0.5)	(0.4–0.5)	(0.4–0.5)	(0.4–0.5)	(0.5–0.6)	(0.5–0.6)	(0.5–0.7)	(0.6–0.7)	(0.6–0.8)	(0.6–0.8)	(0.7–0.9)

TEEN HOSPITALIZATION-BASED FERTILITY RATE

The 2017 Grey Bruce teen hospitalization-based fertility rate of 9.8 per 1000 females aged 15 to 19 is 66% higher than the Ontario teen hospitalization-based fertility rate of 5.9 per 1000, which is half of its 2006 rate. While the 2017 Grey Bruce teen hospitalization-based fertility rate isn't statistically significantly different than the 2006 rate at the p = .05 level, it does appear to be following a similar, generally decreasing, trend to Ontario.

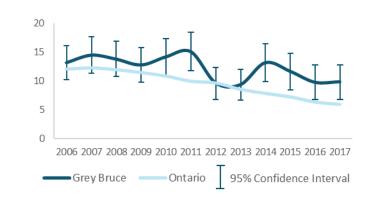


Figure 21. Teen hospitalization-based fertility rate (per 1000 females aged 15 to 19)

	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Grey	13.1	14.4	13.7	12.7	14.1	15.0	9.6	9.3	13.1	11.6	9.7	9.8
Bruce	(10.2–16.1)	(11.3–17.6)	(10.7–16.8)	(9.7–15.7)	(10.9–17.3)	(11.7–18.4)	(6.8–12.3)	(6.6–12.0)	(9.8–16.4)	(8.4–14.7)	(6.8–12.7)	(6.8–12.7)
Ontario	12.0	12.2	11.9	11.4	10.8	9.9	9.6	8.5	7.8	7.2	6.3	5.9
	(11.6–12.3)	(11.8–12.5)	(11.6–12.3)	(11.1–11.8)	(10.5–11.1)	(9.6–10.2)	(9.3–9.9)	(8.2–8.8)	(7.5–8.0)	(7.0–7.5)	(6.0–6.5)	(5.7–6.2)

PREGNANCY RATE

Pregnancy rates are the number of pregnancies per 1000 reproductive-aged females (those aged 15 to 49) (APHEO Core Indicators Workgroup, 2013e). They can also be presented for specific age groups (ibid.). For the purpose of the pregnancy rate indicator, pregnancies include **live births**, **stillbirths**, and **therapeutic abortions** (ibid.). This rate undercounts total pregnancies, which can end in spontaneous abortion (miscarriage, not counted in the pregnancy rate).

OVERALL PREGNANCY RATE

The 2016 Grey Bruce overall pregnancy rate was 58.1 pregnancies per 1000 reproductive-aged females. This rate is slightly higher than the Ontario rate of 53.1 pregnancies per 1000 reproductive-aged females.

The Grey Bruce overall pregnancy rate increased by 25% between 2006 and 2016, while it decreased over the same period by 7% in Ontario.

Figure 22. Overall pregnancy rate (per 1000 females aged 15 to 49)

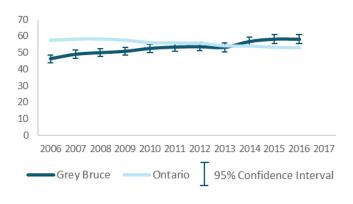


Table 30. Overall pregnancy rate (per 1000 females aged 15 to 49)

	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Grey Bruce	46.3 (44.0–48.5)	49.0 (46.7–51.4)	50.0 (47.6–52.3)	50.8 (48.4–53.2)	52.6 (50.1–55.1)	53.4 (50.8–55.9)	53.6 (51.0–56.1)	53.2 (50.6–55.7)	56.8 (54.1–59.5)	58.2 (55.5–60.9)	58.1 (55.4–60.9)	N/A
Ontario	57.4 (57.2–57.7)	58.1 (57.8–58.3)	58.2 (57.9–58.4)	57.5 (57.3–57.8)	56.1 (55.9–56.4)	55.9 (55.7–56.2)	55.7 (55.5–56.0)	54.2 (54.0–54.5)	54.1 (53.9–54.4)	53.4 (53.1–53.6)	53.1 (52.9–53.4)	N/A

TEEN PREGNANCY RATE

The 2016 Grey Bruce teen pregnancy rate was 20.2 pregnancies per 1000 females aged 15 to 19. The rate is 38% higher than the Ontario rate of 14.6 pregnancies per 1000 females aged 15 to 19.

Between 2006 and 2016, the Ontario teen pregnancy rate fell by 49%. While the Grey Bruce rate appears to follow a similar trend, 2006 and 2016 rates are not statistically significantly different.

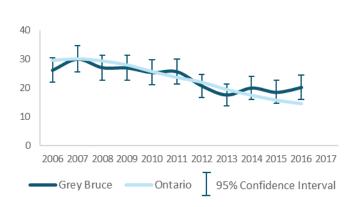


Figure 23. Teen pregnancy rate (per 1000 females aged 15 to 19)

Table 31. Overall pregnancy rate (per 1000 females aged 15 to 19)

	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Grey Bruce	26.1 (22.0–30.3)	29.9 (25.4–34.5)	27.0 (22.6–31.3)	26.9 (22.5–31.3)	25.3 (21.0–29.6)	25.6 (21.2–30.0)	20.7 (16.7–24.7)	17.6 (13.8–21.3)	20.0 (15.9–24.0)	18.5 (14.5–22.5)	20.2 (15.9–24.4)	N/A
Ontario	29.6 (29.1–30.1)	30.1 (29.6–30.6)	29.4 (28.9–29.9)	28.0 (27.5–28.5)	25.7 (25.2–26.1)	23.7 (23.3–24.2)	22.0 (21.5–22.4)	19.5 (19.1–19.9)	17.5 (17.1–17.9)	15.8 (15.4–16.2)	14.6 (14.2–15.0)	N/A

MULTIPLE LIVE BIRTH RATE

The **multiple live birth** rate is the number percentage of **live births** that are *not* singleton births (APHEO Core Indicators Workgroup, 2013d).

The 2017 Grey Bruce **multiple live birth** rate was 2.9%, which was similar to the Ontario rate of 3.2%. Both at the local and provincial level, the **multiple live birth** rate has remained stable between 2006 and 2017, consistently near or slightly above 3%.

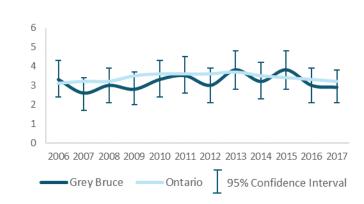


Figure 24. Multiple live birth rate (per 100 live births)

Table 32. Multiple live birth rate	(per 100 live births)
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	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Grey	3.3	2.6	3.0	2.8	3.3	3.5	3.0	3.8	3.2	3.8	3.0	2.9
Bruce	(2.4–4.3)	(1.7–3.4)	(2.1–3.9)	(2.0–3.7)	(2.4–4.3)	(2.6–4.5)	(2.1–3.9)	(2.8–4.8)	(2.3–4.2)	(2.8–4.8)	(2.1–3.9)	(2.1–3.8)
Ontario	3.1	3.2	3.2	3.5	3.6	3.6	3.6	3.7	3.5	3.4	3.3	3.2
	(3.0–3.2)	(3.1–3.2)	(3.1–3.3)	(3.4–3.6)	(3.5–3.7)	(3.5–3.7)	(3.5–3.7)	(3.6–3.8)	(3.4–3.6)	(3.3–3.5)	(3.2–3.4)	(3.1–3.3)

PRETERM BIRTH RATE

The preterm birth rate is the percentage of **live births** with a gestational age at birth of less than 37 completed weeks (APHEO Core Indicators Workgroup, 2013f).

The 2017 Grey Bruce preterm birth rate was 7.4%, which was similar to the Ontario rate of 8.1%. Both at the local and provincial level, the rates have remained similar and more or less stable since 2006.

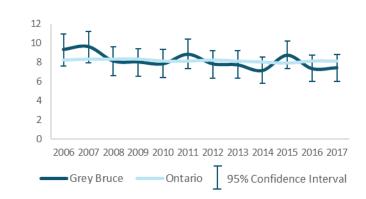


Figure 25. Preterm birth rate (per 100 live births)

	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Grey	9.3	9.6	8.1	8.0	7.8	8.8	7.8	7.7	7.1	8.7	7.3	7.4
Bruce	(7.6–10.9)	(7.9–11.2)	(6.6–9.6)	(6.5–9.4)	(6.4–9.3)	(7.3–10.4)	(6.3–9.2)	(6.3–9.2)	(5.8–8.5)	(7.3–10.2)	(6.0–8.7)	(6.0–8.8)
Ontario	8.2	8.3	8.3	8.3	8.1	8.1	8.2	8.1	8.0	7.9	8.1	8.1
	(8.1–8.4)	(8.1–8.4)	(8.2–8.5)	(8.1–8.4)	(8.0–8.3)	(8.0–8.3)	(8.1–8.4)	(8.0–8.3)	(7.8–8.1)	(7.8–8.1)	(8.0–8.3)	(7.9–8.2)

BIRTH WEIGHT RATES

LOW BIRTH WEIGHT RATE

The low birth weight rate is the percentage of all **live births** (with a valid birth weight recorded) that weighed less than 2500g at birth (APHEO Core Indicators Workgroup, 2014).

The 2017 Grey Bruce low birth weight rate was 6.0%, similar to the Ontario rate of 7.0%. At the local level, rates have remained stable at around 5% to 7% since 2006; at the provincial level, the rate has risen 9% since 2006.

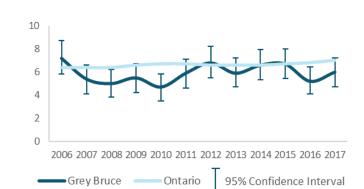


Figure 26. Low birth weight rate (per 100 live births)

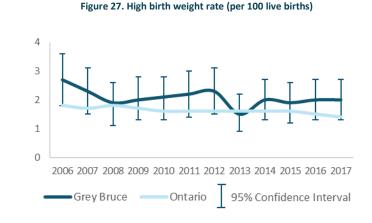
Table 34. Low birth weight rate (per 100 live births)

	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Grey	7.2	5.4	5.0	5.5	4.7	5.9	6.8	5.9	6.6	6.7	5.2	6.0
Bruce	(5.8–8.7)	(4.1–6.6)	(3.8–6.2)	(4.2–6.7)	(3.5–5.8)	(4.6–7.1)	(5.5–8.2)	(4.7–7.2)	(5.3–7.9)	(5.4–8.0)	(4.1–6.4)	(4.7–7.2)
Ontario	6.4	6.4	6.4	6.6	6.7	6.7	6.6	6.6	6.6	6.7	6.8	7.0
	(6.3–6.5)	(6.3–6.6)	(6.3–6.6)	(6.4–6.7)	(6.6–6.9)	(6.6–6.8)	(6.4–6.7)	(6.5–6.8)	(6.5–6.8)	(6.6–6.9)	(6.7–7.0)	(6.8–7.1)

HIGH BIRTH WEIGHT RATE

The high birth weight rate is the percentage of all **live births** (with a valid birth weight recorded) that weighted 4500g or more at birth (APHEO Core Indicators Workgroup, 2014).

The 2017 Grey Bruce high birth weight rate was 2.0%, similar to the Ontario rate of 1.4%. At the local level, the rate has remained stable at around 2% to 2.5% since 2006, while at the provincial level the rate has fallen by 22%.



	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Grey	2.7	2.3	1.9	2.0	2.1	2.2	2.3	1.5	2.0	1.9	2.0	2.0
Bruce	(1.8–3.6)	(1.5–3.1)	(1.1–2.6)	(1.3–2.8)	(1.3–2.8)	(1.4–3.0)	(1.5–3.1)	(0.9–2.2)	(1.3–2.7)	(1.2–2.6)	(1.3–2.7)	(1.3–2.7)
Ontario	1.8	1.7	1.8	1.7	1.6	1.6	1.6	1.6	1.6	1.6	1.5	1.4
	(1.7–1.8)	(1.7–1.8)	(1.8–1.9)	(1.6–1.8)	(1.5–1.7)	(1.5–1.7)	(1.5–1.6)	(1.6–1.7)	(1.6–1.7)	(1.5–1.7)	(1.4–1.6)	(1.4–1.5)

Table 35. Low birth weight rate (per 100 live births)

AGE OF MOTHER AT INFANT'S BIRTH

AVERAGE AGE OF MOTHER AT BIRTH OF FIRST INFANT

The average age of mother at birth of first infant is the average age of all women who gave birth to **live births** for the first time (APHEO Core Indicators Workgroup, 2013a). This should be interpreted with caution in 2006, as up to 23% of mother's age data are missing for that year (ibid.).

In 2017, the average age of Grey Bruce mothers at the birth of their first infant was 27.8 years, which was nearly 2 years younger than Ontario's 29.5 years. Over time, the average age of Grey Bruce first-time mothers has increased by about 2 years, from 25.5 years in 2007. The age of Ontario mothers at first birth has also increased since 2007, but only by about 1 and a half years.

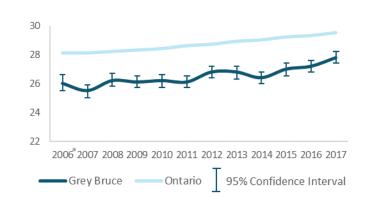


Table 36. Average age of mother at birth of first infant

	2006*	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Grey	26.0	25.5	26.2	26.1	26.2	26.1	26.8	26.8	26.4	27.0	27.2	27.8
Bruce	(25.5–26.6)	(25.0–25.9)	(25.8–26.7)	(25.7–26.5)	(25.7–26.6)	(25.7–26.5)	(26.4–27.2)	(26.3–27.2)	(26.0–26.8)	(26.5–27.4)	(26.8–27.6)	(27.4–28.2)
Ontario	28.1	28.1	28.2	28.3	28.4	28.6	28.7	28.9	29.0	29.2	29.3	29.5
	(28.1–28.2)	(28.1–28.2)	(28.1–28.2)	(28.2–28.3)	(28.4–28.4)	(28.5–28.6)	(28.7–28.7)	(28.8–28.9)	(29.0–29.1)	(29.1–29.2)	(29.2–29.3)	(29.4–29.5)

Figure 28. Average age of mother at birth of first infant

AVERAGE AGE OF MOTHER AT INFANT'S BIRTH

The average age of mother at infant's birth is the average age of all women who gave birth to **live births**, regardless of birth order. As with the previous indicator this should be interpreted with caution in 2006, as up to 23% of mother's age data are missing for that year.

The average age of Grey Bruce mothers at the birth of their infant in 2017 was 29.3 years, about 1.5 years younger than Ontario's 30.9 years. Over time, the average age of Grey Bruce mothers at the birth of their infant(s) has increased by almost 1.5 years, from 27.9 years in 2007. The age of Ontario mothers at the birth of their infant(s) has also increased since 2007, but only by 1.1 years.

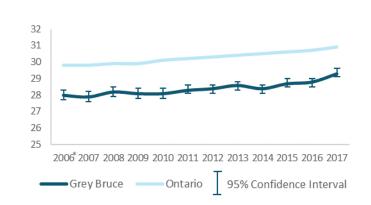


Figure 29. Average age of mother at infant's birth

Table 37. Average age of mother at infant's birth

	2006*	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Grey	28.0	27.9	28.2	28.1	28.1	28.3	28.4	28.6	28.4	28.7	28.8	29.3
Bruce	(27.7–28.3)	(27.6–28.2)	(27.9–28.5)	(27.8–28.4)	(27.8–28.4)	(28.1–28.6)	(28.1–28.6)	(28.3–28.8)	(28.1–28.6)	(28.5–29.0)	(28.5–29.0)	(29.1–29.6)
Ontario	29.8	29.8	29.9	29.9	30.1	30.2	30.3	30.4	30.5	30.6	30.7	30.9
	(29.8–29.8)	(29.8–29.9)	(29.8–29.9)	(29.9–30.0)	(30.0–30.1)	(30.1–30.2)	(30.2–30.3)	(30.3–30.4)	(30.4–30.5)	(30.6–30.6)	(30.7–30.8)	(30.9–30.9)

INFANT FEEDING

INTENTION TO BREASTFEED

The rate of intention to breastfeed is the percentage of women who gave birth (**live birth** or **stillbirth**) who reported that they intended to breastfeed their child exclusively or in combination with breast milk substitute, self-reported during the pregnancy or at the time of birth (APHEO Core Indicators Workgroup, 2016c).

INTENTION TO BREASTFEED, OVERALL

In 2017, the Grey Bruce rate of intention to breastfeed was 94.1%, nearly identical to the Ontario rate of 93.9%. Over time, this rate has remained fairly stable.

100 95 90 85 80 2013 2014 2015 2016 2017 95% Confidence Interval

Figure 30. Rate of intention to breastfeed, overall (%)

Table 38. Rate of intention to breastfeed: overall (%)

	2013	2014	2015	2016	2017
Grey	94.5	96.2	94.5	95.0	94.1
Bruce	(89.5–99.5)	(91.3–101.1)	(89.6–99.3)	(90.1–100.0)	(89.3–99.0)
Ontario	93.0	93.4	93.6	93.7	93.9
	(92.4–93.5)	(92.9–94.0)	(93.0–94.1)	(93.1–94.2)	(93.3–94.4)

INTENTION TO BREASTFEED, BY AGE GROUP

The rates of intention to breastfeed have remained fairly stable in Grey Bruce and at the provincial level over the last five years. Of note, the rate of intention to breastfeed among young women in the province is slightly lower than among the two older age groups, however does not hold at the local level.

Figure 31. Trends in rates of intention to breastfeed, by age group (%)

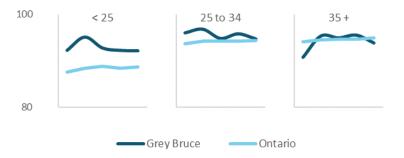


Table 39. Rates of intention to breastfeed in Grey Bruce, by age group (%)

	2013	2014	2015	2016	2017
< 25	92.3	95.1	92.8	92.3	92.2
	(82.3–102.4)	(85.1–105.1)	(82.3–103.4)	(81.4–103.2)	(80.8–103.7)
25 to 34	96.0	96.8	94.8	95.8	94.7
	(89.7–102.3)	(90.5–103.0)	(88.9–100.8)	(89.7–101.8)	(88.7–100.7)
35 +	90.8	95.4	95.0	95.6	93.9
	(76.6–104.9)	(81.8–109.1)	(81.5–108.5)	(81.5–109.8)	(81.7–106.0)

Table 40. Rates of intention to breastfeed in Ontario, by age group (%)

	2013	2014	2015	2016	2017
< 25	87.6	88.4	88.8	88.5	88.7
	(86.2–88.9)	(87.0–89.8)	(87.3–90.2)	(87.0–89.9)	(87.2–90.2)
25 to 34	93.7	94.2	94.2	94.3	94.4
	(93.1–94.4)	(93.5–94.8)	(93.5–94.8)	(93.6–94.9)	(93.7–95.0)
35 +	94.1	94.5	94.7	94.7	94.9
	(93.0–95.3)	(93.4–95.6)	(93.5–95.8)	(93.6–95.8)	(93.8–95.9)

EXCLUSIVE BREASTFEEDING AT HOSPITAL DISCHARGE

The rate of exclusive breastfeeding at hospital discharge is the percentage of infants who were exclusively fed breast milk (i.e., were fed breast milk but no breast milk substitute) while in the hospital (APHEO Core Indicators Workgroup, 2016c).

EXCLUSIVE BREASTFEEDING AT HOSPITAL DISCHARGE, OVERALL

In 2017, the Grey Bruce rate of exclusive breastfeeding at hospital discharge was 74.8%, 22% higher than the Ontario rate of 61.2%. At both geographies, the rate has remained more or less stable since 2013 (the Ontario rate fell by 2.5% between 2016 and 2017—a statistically significant but small amount).

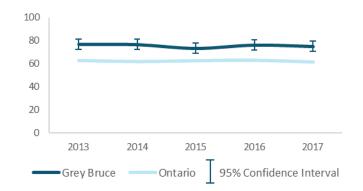


Figure 32. Rate of exclusive breastfeeding at hospital discharge, overall (%)

Table 41. Rate of exclusive breastfeeding at hospital discharge: overall (%)

	2013	2014	2015	2016	2017
Grey	76.7	76.4	73.2	76.0	74.8
Bruce	(72.1–81.2)	(71.9–80.9)	(68.8–77.5)	(71.5–80.5)	(70.4–79.2)
Ontario	62.5	61.6	62.3	62.7	61.2
	(62.0–62.9)	(61.1–62.0)	(61.8–62.7)	(62.2–63.1)	(60.8–61.6)

EXCLUSIVE BREASTFEEDING AT HOSPITAL DISCHARGE, BY AGE GROUP

From 2013 to 2016, the Grey Bruce rate of exclusive breastfeeding at hospital discharge for infants of moms aged under 25 was significantly higher than the Ontario rate. The local rate fell abruptly from 2016 to 2017 (but by a non-statistically-significant amount), and is no longer significantly higher than the Ontario rate for that age group. Among newborns of mothers aged 25 to 34, local rates of exclusive breastfeeding at hospital discharge were significantly higher across all years; while among newborns of mothers aged 35 and older, local rates were statistically significantly higher than provincial rates in all years except 2016. For these two older age groups, local and provincial rates appear to be fairly stable.

In 2017, newborns of Grey Bruce mothers under 25 were 21% less likely than the group with the next lowest rate, newborns of Grey Bruce mothers 25 to 34, to be exclusively breastfed at hospital discharge (61.3% compared to 77.65). Newborns of Grey Bruce mothers aged 25 to 34 were

Table 42. Rates of exclusive breastfeeding at hospital discharge in Grey Bruce, by age group (%)

	2013	2014	2015	2016	2017
< 25	77.5	73.4	70.2	72.9	61.3
	(68.2–86.8)	(64.4–82.3)	(60.9–79.5)	(63.0–82.7)	(51.9–70.7)
25 to 34	77.1	78.5	73.6	78.1	77.6
	(71.4–82.8)	(72.8–84.3)	(68.3–79.0)	(72.5–83.6)	(72.1–83.1)
35 +	72.6	71.7	75.6	69.7	78.5
	(59.5–85.6)	(59.7–83.7)	(63.4–87.9)	(57.3–82.1)	(67.0–90.0)

23% more likely than newborns of Ontario mothers in that age group to be exclusively breastfeed at hospital discharge, and newborns of Grey Bruce mothers aged 35 and over were 35% more likely than newborns of Ontario mothers in that age group to be exclusively breastfed.

Figure 33. Trends in rates of exclusive breastfeeding at hospital discharge, by age group (%)

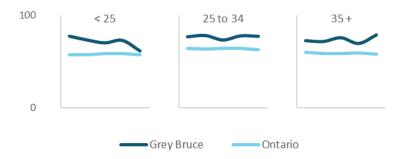


Table 43. Rates of exclusive breastfeeding at hospital discharge in Ontario, by age group (%)

	2013	2014	2015	2016	2017
< 25	57.6	57.3	58.5	58.6	57.7
	(56.4–58.7)	(56.2–58.5)	(57.3–59.7)	(57.4–59.8)	(56.4–59.0)
25 to 34	64.4	63.4	64.2	64.5	62.9
	(63.8–65.0)	(62.8–64.0)	(63.6–64.8)	(63.9–65.0)	(62.3–63.4)
35 +	59.9	58.8	59.0	59.7	58.3
	(59.0–60.9)	(57.8–59.7)	(58.0–59.9)	(58.8–60.6)	(57.4–59.2)

GROWTH AND DEVELOPMENT

ENHANCED WELL-BABY VISIT

In October 2009, the Ontario Ministry of Health and Long-term Care and the Ministry of Children and Youth Services introduced two new fee codes (one for family physicians and one for paediatricians) to allow for billing a discussion of the child's development using screening tools completed by the caregiver and physician (APHEO Core Indicators Workgroup, 2017a).

The rate of enhanced well-baby visits is the percentage of children between ages 1 and 2 who had an enhanced well-baby visit (ibid.).

In 2017, the Grey Bruce rate of enhanced well-baby visits was 51.2%, 14% lower than the Ontario rate of 59.2%. At both geographies, the rate increased since 2010, with most of the growth in Ontario occurring within the first five to six years, and most of the growth in Grey Bruce occurring in the last three to four years. The Ontario rate increased 42% since 2010, while the Grey Bruce rate increased 56%.

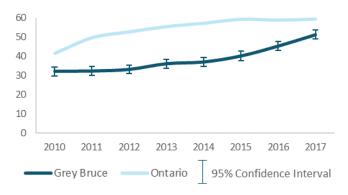


Figure 34. Rate of enhanced well-baby visits (%)

	2010	2011	2012	2013	2014	2015	2016	2017
Ontario	32.1 (29.8–34.5)	32.2 (29.9–34.5)	33.1 (30.8–35.3)	36 (33.7–38.4)	36.9 (34.5–39.3)	40.1 (37.7–42.5)	45.3 (42.8–47.7)	51.2 (48.8–53.6
Grey	41.6	49.6	52.6	55.3	57.1	59.1	58.6	59.2
Bruce	(41.4-41.9)	(49.4–49.9)	(52.4–52.9)	(55.1–55.6)	(56.8–57.3)	(58.8–59.3)	(58.4–58.9)	(59.0-59.5

Table 44. Rate of enhanced well-baby visits (%)

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