Recent reports show the highest prevalence of prenatal smoking behaviors nationally are among American Indian and Alaska Native (AI/AN) women. Evidence suggests smoking during pregnancy increases risk for miscarriages, preterm births, and low birth weight babies and can also cause tissue damage, usually in the brain and lungs, of the fetus. Also, babies are three times as likely to die from Sudden Infant Death Syndrome if their mothers smoke.

The Urban Indian Health Institute used Vital Statistics data from the Centers for Disease Control and Prevention’s (CDC) National Center for Health Statistics (NCHS) to look at the rate of prenatal smoking for births to AI/AN and white women residing in Urban Indian Health Organization (UIHO) service areas from 2006-2010.

Smoking during pregnancy is the most common cause of infant disease and death. The implementation and effectiveness of smoking cessation interventions should be considered for the urban AI/AN population. Multiple interventions including counseling and clinical screening have been shown to increase smoking cessation.

For all of the years studied, the AI/AN prenatal smoking rate was significantly higher than that for whites.

The prenatal smoking rate for both urban AI/ANs and urban whites dropped over this five year period. Rates per 1,000 births for whites fell from 6.1 in 2006 to 3.6 in 2010. For AI/ANs, the rates per 1,000 births fell from 10.8 in 2006 to 9.1 in 2010 (Figure 1).

While declining prenatal smoking rates are encouraging, disparities remain. For all of the years studied, the AI/AN prenatal smoking rate was significantly higher than that for whites.

References
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3. NCHS. Natality, 2006-2010. as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program.