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Birth rate by ethnicity

2019201820172016201520142013201220112010200920082007200620052004200320022001200019991998199719961995199419931992199119901989198819871986198519841983198219811980197919781977197619751974197319721971197019691968196719661965196419631962196119602019201820172016201520142013201220112010200920082007200620052004200320022001200019991998199719961995199419931992199119901989198819871986198519841983198219811980197919781977197619751974197319721971197019691968196719

Countries and Economies Definitions: Live births by race and ethnicity of mother. On birth certificates, as on most federal data collection forms, the question regarding whether a person is Hispanic is separate from the question asking whether a person is white, Black, Asian or Pacific Islander, or American Indian. Thus, people are asked to select a racial group and to indicate whether they are of Hispanic origin. A birth to a woman who reported that she was Hispanic and white would usually be included in figures for both of these groups. In order to create mutually exclusive categories, Hispanics were removed from the black and white racial categories in the tabulations presented here. This allows more meaningful comparisons between minorities and the group people typically think of when we say white. It should also be noted that these figures represent the race of the mother, not the race of the child. This is important because increasing numbers of children are born to parents of different races. Births for which Hispanic origin was not reported are included in the "Other" category. Data Source: Population Reference Bureau analysis of 1990 - 2019 Final Birth data, National Center for Health Statistics. Footnotes: Updated February 2021. N.A. - Data not available. The information provided above is from the Department of Health's NJSHAD web site (. The information published on this website may be reproduced without permission. Please use the following citation: " Retrieved Sun, 04 July 2021 6:23:37 from Department of Health, New Jersey State Health Assessment Data Web site: ". Content updated: no date image copyrightGetty Imagesimage captionThe downward trend in birth rates in the US has been seen throughout the worldThe American birth rate fell for the sixth consecutive year in 2020, with the lowest number of babies born since 1979, according to a new report.Some 3.6 million babies were born in the US in 2020 - marking a 4% decline from the year before, found the US Centers for Disease Control and Prevention (CDC) National Center for Health Statistics.The slump was seen across all recorded ethnicities and origins, according to the findings. The national picture mirrors a decline in births seen worldwide, a trend some experts say has been accelerated by the ongoing coronavirus pandemic. In the CDC report, demographers examined the country's general fertility rate, which compares the number of live births with the number of women considered to be of childbearing age - between 15 and 44 years old. In 2020, the general fertility rate in the US was about 56 births per 1,000 women - the lowest rate on record and about half of what it was in the early 1960s. The decline in birth rates was seen across all measured racial and ethnic groups. Births dropped by 4% among white, black and Latina women, 9% for Hawaiians and other Pacific Islanders and 7% for Native American and Alaska native women. media captionHow has giving birth changed during the pandemic?The report also analysed the total US fertility rate, which estimates how many babies a hypothetical group of 1,000 women would have over their lifetime based on actual birth rates. For a generation to exactly replace itself, this number must be at or above 2.1.According to the CDC, this rate has generally been "below replacement" since 1971 and has consistently been below replacement since 2007. Today, the US total fertility rate sits at 1.6 - another record low. Experts say the country's tumbling birth rate is closely linked to the average age of American mothers. Women are becoming mothers later in life - a phenomenon tied to increases in educational attainment, growing labour force participation and delays in marriage, according to the Pew Research Center. The average age of mothers at first birth is 27, up from 23 in 2010, recent CDC data has found. This changing picture of motherhood has been driven in part by declines in pregnancy among teenagers. The birth rates among teenagers aged 15-19 had the steepest decline of all age groups: down by 8% in 2020 to around 15 births per 1,000 females.The National Center for Health Statistics has said it is too early to determine whether the pandemic had a significant effect on birth rates because this year's data is in keeping with past trends. But initial research suggests that Covid-19 may have compounded existing patterns. image captionThe average age of mothers is rising - driven by the decline in teenage pregnanciesIn a June 2020 study by the Guttmacher Institute, one in three US women said that because of Covid-19, they were likely to delay having children or have fewer children altogether. And researchers from the Brookings Institution - who predicted a "large, lasting baby bust" due to Covid-19 - have suggested that the anxiety and economic uncertainty wrought by the pandemic will further depress birth rates going forward. Data from the CDC shows births falling most sharply toward the end of last year when babies conceived at the start of the pandemic would have been born. The slowing US birth rate is echoed by worldwide trends.While wealthy countries like Germany and Japan have seen slowing birth rates for some time, the same is now happening in middle-income countries as well, including Thailand and Brazil. Globally, the fertility rate is expected to fall below replacement levels - 2.1 births per woman - by 2070, according to a 2019 report from the UN. By the end of this century, the report found, the world's population is projected to virtually stop growing for the first time in history. And a widely cited study published in the Lancet last year suggested this population peak would come even earlier - in 2064. Between 2020 and 2100, 90 countries are expected to lose population, including two-thirds of all countries and territories in Europe. According to the UN numbers, Africa is the only region in the world projected to have strong population growth for the rest of the 21st Century - mostly concentrated in sub-Saharan Africa. Similar to trends in the US, the UN has linked falling fertility rates and population growth to gradual delays in childbearing among women. Though the mean age of childbearing varies widely throughout the world, overall increases will continue to lower fertility rates and global population growth in turn. Coronavirus pandemicUnited StatesPregnancyWomen NCHS Data Brief No. 387, October 2020 PDF Versionpdf icon (389 KB) Joyce A. Martin, M.P.H., Brady E. Hamilton, Ph.D., and Michelle J.K. Osterman, M.H.S. Key findings Data from the National Vital Statistics System The U.S. general fertility rate declined 1% in 2019 to 58.3 births per 1,000 women aged 15–44 from 59.1 in 2018; rates declined for non-Hispanic white, non-Hispanic black, and Hispanic women. The percentage of mothers beginning prenatal care in the first trimester of pregnancy increased from 2018 to 2019 among non-Hispanic white and non-Hispanic black women, but decreased among Hispanic women. Medicaid as the source of payment for the delivery declined from 42.3% to 42.1% from 2018 to 2019. The preterm birth rate rose 2% from 2018 to 2019 from 10.02% to 10.23%; rates rose for each race and Hispanic origin group. This report presents selected highlights from 2019 final birth data on key demographic, health care utilization, and infant health indicators. General fertility rates (the number of births per 1,000 women aged 15–44), prenatal care timing (the percentage of mothers with first trimester care), source of payment for the delivery (the percentage of births covered by Medicaid), and preterm birth rates are presented. All indicators are compared between 2018 and 2019 and are presented for all births and for the three largest race and Hispanic-origin groups: non-Hispanic white, non-Hispanic black, and Hispanic. Keywords: general fertility rates, prenatal care, Medicaid, preterm birth, National Vital Statistics System The general fertility rate declined for all three race and Hispanic-origin groups in 2019. The general fertility rate for the United States declined 1% in 2019 to 58.3 per 1,000 women aged 15–44 from 59.1 in 2018 (Figure 1). Fertility rates declined for the three largest race and Hispanic-origin groups from 2018 to 2019, down 2% for non-Hispanic white women (56.3 to 55.3) and 1% for non-Hispanic black (62.0 to 61.4) and Hispanic (65.9 to 65.3) women. In 2019, the fertility rate was highest for Hispanic women, followed by non-Hispanic black and non-Hispanic white women. Figure 1. General fertility rates, by race and Hispanic origin of mother: United States, 2018 and 2019 image iconimage icon 1Significant decline from 2018 ($p < 0.05$). 2Significant difference between all race and Hispanic-origin groups ($p < 0.05$). NOTE: Access data table for Figure 1pdf icon. SOURCE: National Center for Health Statistics, National Vital Statistics System, Natality First trimester prenatal care increased in the United States in 2019. The percentage of women beginning prenatal care in the first trimester of pregnancy increased from 77.5% to 77.6% between 2018 and 2019 (Figure 2). First trimester prenatal care rose for non-Hispanic white (82.5% to 82.8%) and non-Hispanic black (67.1% to 67.6%) women, but declined for Hispanic (72.7% to 72.1%) women. In 2019, initiation of prenatal care in the first trimester was highest among non-Hispanic white women, followed by Hispanic women and non-Hispanic black women. Figure 2. Prenatal care beginning in the first trimester, by race and Hispanic origin of mother: United States, 2018 and 2019 image iconimage icon 1Significant increase from 2018 ($p < 0.05$). 2Significant decline from 2018 ($p < 0.05$). 3Significant difference between all race and Hispanic-origin groups ($p < 0.05$). NOTE: Access data table for Figure 2pdf icon. SOURCE: National Center for Health Statistics, National Vital Statistics System, Natality. Medicaid as the source of payment for the delivery declined in 2019. In 2019, the percentage of women for whom Medicaid was the source of payment for the delivery declined to 42.1% from 42.3% in 2018 (Figure 3). Medicaid as the source of payment declined for non-Hispanic white (30.0% to 29.4%) and non-Hispanic black (65.3% to 65.1%) women and increased for Hispanic (58.9% to 59.0%) women. Non-Hispanic black women were more than twice, and Hispanic women were twice as likely as non-Hispanic white women to have births covered by Medicaid in 2019 (65.1% and 59.0% compared with 29.4%). Figure 3. Medicaid as source of payment for the delivery, by race and Hispanic origin of mother: United States, 2018 and 2019 image iconimage icon 1Significant decline from 2018 ($p < 0.05$). 2Significant increase from 2018 ($p < 0.05$). 3Significant difference between all race and Hispanic-origin groups ($p < 0.05$). NOTE: Access data table for Figure 3pdf icon. SOURCE: National Center for Health Statistics, National Vital Statistics System, Natality. The U.S. preterm birth rate increased 2% between 2018 and 2019. The percentage of newborns delivered preterm rose to 10.23% in 2019, a 2% increase over the 2018 rate of 10.02% (Figure 4). Preterm rates increased 2% among births to each of the largest race and Hispanic-origin groups from 2018 to 2019; non-Hispanic white (9.09% to 9.26%), non-Hispanic black (14.13% to 14.39%), and Hispanic (9.73% to 9.97%). Increases were seen for late preterm births between 2018 and 2019 among all births (from 7.28% to 7.46%) and each of the three race and Hispanic-origin groups. Early preterm birth rates increased slightly between 2018 (2.75%) and 2019 (2.77%) among all births and among Hispanic births (2.56% to 2.61%). Preterm rates for births to non-Hispanic black women were about 50% higher than those for births to non-Hispanic white and Hispanic women in 2019 (14.39% compared with 9.26% and 9.97%). Figure 4. Preterm birth rates, by race and Hispanic origin of mother: United States, 2018 and 2019 image iconimage icon 1Data do not add to totals due to rounding. 2Significant increase from 2018 ($p < 0.05$). 3Significant difference between all race and Hispanic-origin groups ($p < 0.05$). NOTES: Preterm is less than 37 weeks of gestation, late preterm is 34–36 weeks of gestation, and early term is less than 34 weeks of gestation. Access data table for Figure 4pdf icon. SOURCE: National Center for Health Statistics, National Vital Statistics System, Natality. Summary The general fertility rate declined to 58.3 births per 1,000 women aged 15–44 in 2019, another record low for the United States (1–3). Declines were observed for the three largest race and Hispanic-origin groups: non-Hispanic white, non-Hispanic black, and Hispanic. The percentage of all women beginning care in the first trimester of pregnancy increased slightly, a continuation of trends observed since 2016 (the first year for which national prenatal care data collected in the revised format were available) (2,4). Medicaid as the source of payment for the delivery declined to the lowest level reported since 2016 (also the first year for which national data are available) (2,4). The percentage of infants born preterm rose for the fifth straight year to the highest level reported since 2008 (2,4). Differences in these key measures of maternal and newborn well-being by race and Hispanic origin were evident for 2019 as in earlier years (2,4). Non-Hispanic black and Hispanic mothers were more likely than non-Hispanic white mothers to begin prenatal care later in pregnancy, to have Medicaid as the source of payment for the delivery, and to have a preterm birth in 2019. Definitions General fertility rate: Number of births per 1,000 women aged 15–44. First trimester prenatal care: Care beginning in the first 3 months of pregnancy. Medicaid: Medicaid or other state program as the principal source of payment for the delivery. Preterm birth rate: Births delivered prior to 37 completed weeks of gestation per 100 births. Gestational age is based on the obstetric estimate of gestation. Early preterm birth rate: Births delivered at less than 34 completed weeks of gestation per 100 births. Late preterm birth rate: Births delivered at 34–36 completed weeks of gestation per 100 births. Data source and methods This report uses data from the Natality Data File from the National Vital Statistics System. The vital statistics natality file is based on information derived from birth certificates and includes information for all births occurring in the United States. This report accompanies the release of the 2019 natality public-use file (5). More detailed analysis of the topics presented in this report plus many others such as fertility, births to unmarried women, tobacco use during pregnancy, pregnancy risk factors, receipt of WIC food, maternal morbidity, and breastfeeding is possible by using the annual natality files (5). The race and Hispanic-origin groups shown in this report follow the 1997 Office of Management and Budget standards and differ from the bridged-race categories shown in reports prior to 2016 (1). References to increases or decreases in rates or percentages indicate differences are statistically significant at the 0.05 level based on a two-tailed z test. Computations exclude records for which information is unknown. About the authors Joyce A. Martin, Brady E. Hamilton, and Michelle J.K. Osterman are with the National Center for Health Statistics, Division of Vital Statistics, Reproductive Statistics Branch. References Martin JA, Hamilton BE, Osterman MK, Driscoll AK, Mathews TJ. 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Copyright information All material appearing in this report is in the public domain and may be reproduced or copied without permission; citation as to source, however, is appreciated. National Center for Health Statistics Brian C. Moyer, Ph.D., Director Amy M. Branum, Ph.D., Acting Associate Director for Science Division of Vital Statistics Steven Schwartz, Ph.D., Director Isabelle Horon, Dr.P.H., Acting Associate Director for Science

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