



Allegheny County Birth Report: 2017

A publication of the

Allegheny County Health Department
Bureau of Assessment, Statistics & Epidemiology
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EXECUTIVE SUMMARY

The 2017 Allegheny County Birth Report contains final 2017 natality data including birth and fertility rates, birthweight, maternal age, preterm birth, births to teen mothers, smoking during pregnancy, smoking cessation, trimester of and prenatal care, delivery method, intent to breastfeed, WIC enrollment, principal source of payment, BMI and weight gain during pregnancy, quarterly and monthly 2017 data, and most popular child names. Where possible, data were compared between Allegheny County and Pennsylvania, as well as analyzing trend data from 2003 through 2017.

In 2017, the crude birth rate for Allegheny County was 10.6 per 1,000 population, which is lower than the 2016 birth rate of 10.8 per 1,000. The general fertility rate for women 15-44 decreased slightly from 55.9 per 1,000 in 2016 to 54.7 per 1,000 in 2017.

Other major findings of the 2017 Allegheny County Birth Report include:

- From 2003 through 2017, the overall percentage of resident live births with low birthweight for Allegheny County has remained consistent.
- The percent of county resident live births with low birthweight increased from 8.6% in 2016 to 9.0% in 2017.
- The percent of county resident live births with very low birthweight increased from 1.5% in 2016 to 1.6% in 2017.
- By race, the highest percentage of low birth weight and very low birthweight babies were among black women (15.3% and 3.9%, respectively). Those with less than high school education had the highest percentage of low and very low birthweight babies (14.5% and 2.1%, respectively).
- The proportion of resident live births that were preterm decreased from 11.3% in 2003 to 8.6% in 2016; however, it has risen to 9.9% in 2017. Black mothers had the highest proportion of preterm births (15.7%), while White mothers had the smallest proportion (8.5%). Preterm births have increased for both Black and White mothers since 2016.
- Teen birth rate has been declining since 2003, and has decreased from 11.8 per 1,000 females aged 15-19 years in 2016 to 10.2 per 1,000 females aged 15-19 years in 2017.
- Teen mothers had a slightly higher rate of smoking at least one cigarette during pregnancy than non-teen mothers (12.3% vs. 9.8%). Teen mothers also had higher rates of being enrolled in WIC (70.1% vs. 23.6%) and Medicaid (67.1% vs. 27.2%).
- The percent of mothers who smoked at least one cigarette during pregnancy in Allegheny County has decreased each year since 2007, decreasing from 18.1% in 2007 to 9.3% in 2017.
- Out of the women who smoked in the three months prior to their pregnancy, 16.7% did not smoke during their pregnancy. As the mother's educational attainment increased, the percentage of smoking cessation increased.
- Out of the mothers with known trimester of first prenatal care visit, 86.6% received care in the first trimester, and 0.6% never received prenatal care during pregnancy. Asian/Pacific Islander mothers had the largest percentage of first prenatal care visits in the first trimester (88.2%), while Multirace mothers had the largest percentage of first prenatal care visits in the second trimester (28.1%), and third trimester (21.5% and 8.0%, respectively). The percent of first trimester prenatal care increased with increasing education level.



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- The percent of resident live births that involved a cesarean delivery method increased from 2003 (25.2%) through 2017 (30.1%).
- The proportion of mothers who intend to breastfeed has increased since 2003 overall, for all races, and Hispanic mothers. Mothers aged 30-34 and Asian/Pacific Islander mothers had the greatest proportion of intention to breastfeed (85.5% and 94.3%).
- Percent WIC Enrollment has decreased since 2009 (32.1%). In 2017, 24.9% of mothers were enrolled.



**2017 ALLEGHENY COUNTY
BIRTH REPORT
SUMMARY AND ILLUSTRATIONS**



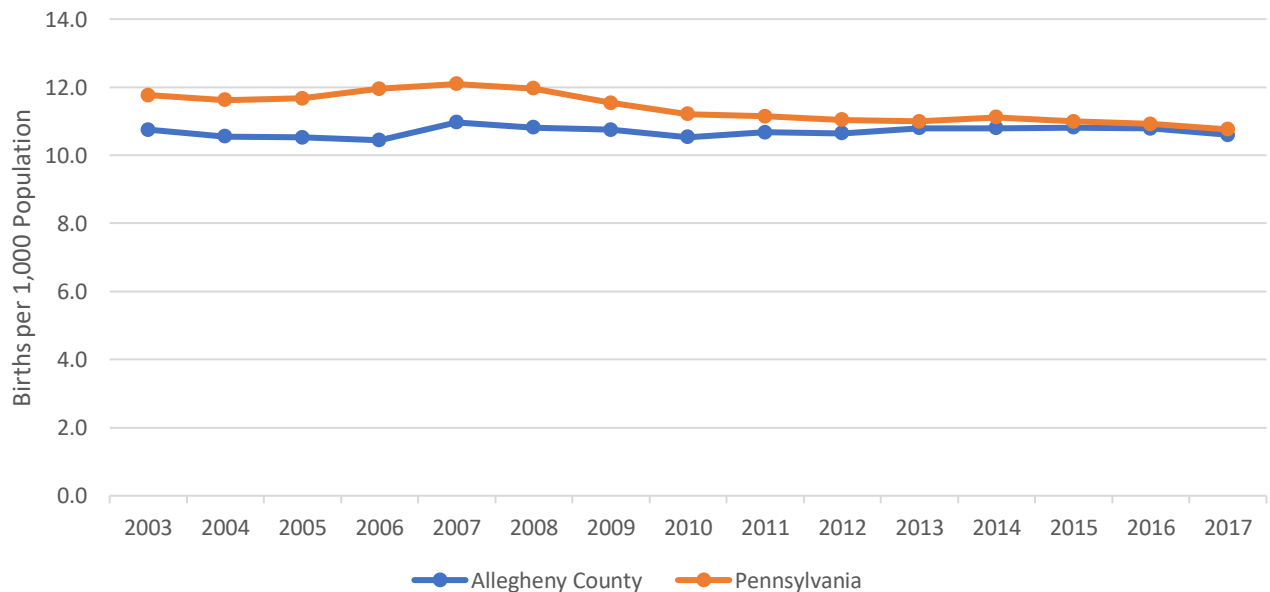
BIRTH RATES

Crude Birth Rate

In 2017, there were a total of 12,958 resident live births in Allegheny County, resulting in a crude birth rate of 10.6 per 1,000 population. This is slightly lower than the previous three years (10.8 per 1,000). The Allegheny County crude birth rate has changed for the first time since 2013. The 2017 Pennsylvania crude birth rate of 10.8 per 1,000 population. This is also lower than 2016 (10.9 per 1,000), though the Pennsylvania birth rate has been slightly declining since 2003. From 2003 through 2017, the gap between the Pennsylvania and Allegheny County crude rate has overall decreased from 1.0 per 1,000 population to 0.2 per 1,000 population. Since 2008, the Allegheny County birthrate has been trending downward, with an average annual percent change (APC) of -0.06%; however, this change is not significant.

Since 2003, the crude birth rate has remained highest among mothers aged 30 to 34. This rate was fairly consistent with mothers aged 25 to 29; however, the rate for this age group has decreased significantly compared to 30 to 34 year-olds since 2010. Overall, the birth rate of those below 30 has been decreasing, while the birth rate of those above age 30 has been increasing. For the 15 to 19 age group, the crude birth rate has decreased by 10.7% since 2010. For 20 to 24 year-olds, the rate has decreased by 2.0% since 2003. From 2008 to 2011, the birth rate for 25 to 29 year-olds decreased by 8.8%. More recently, it has decreased overall by 1.7% between 2011 and 2017. While there has been a slight increase in the birth rate among the 30 to 34 age group, this change is not significant; however, the 35 to 39 age group has experienced a significant increase of 1.1% since 2003. Since 2003, the overall birthrate for women aged 45+ has increased by 3.6%.

Figure 1. Crude Birth Rate:
Allegheny County and Pennsylvania, 2003-2017

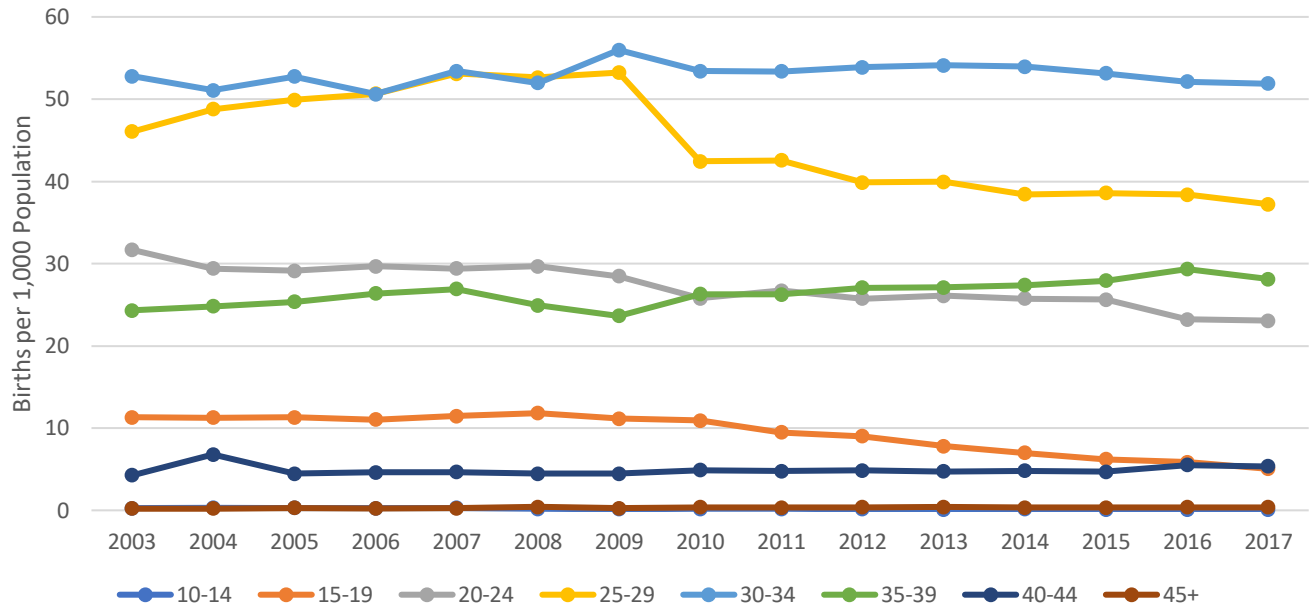




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Figure 2. Age-Specific Birth Rate: Allegheny County, 2003-2017

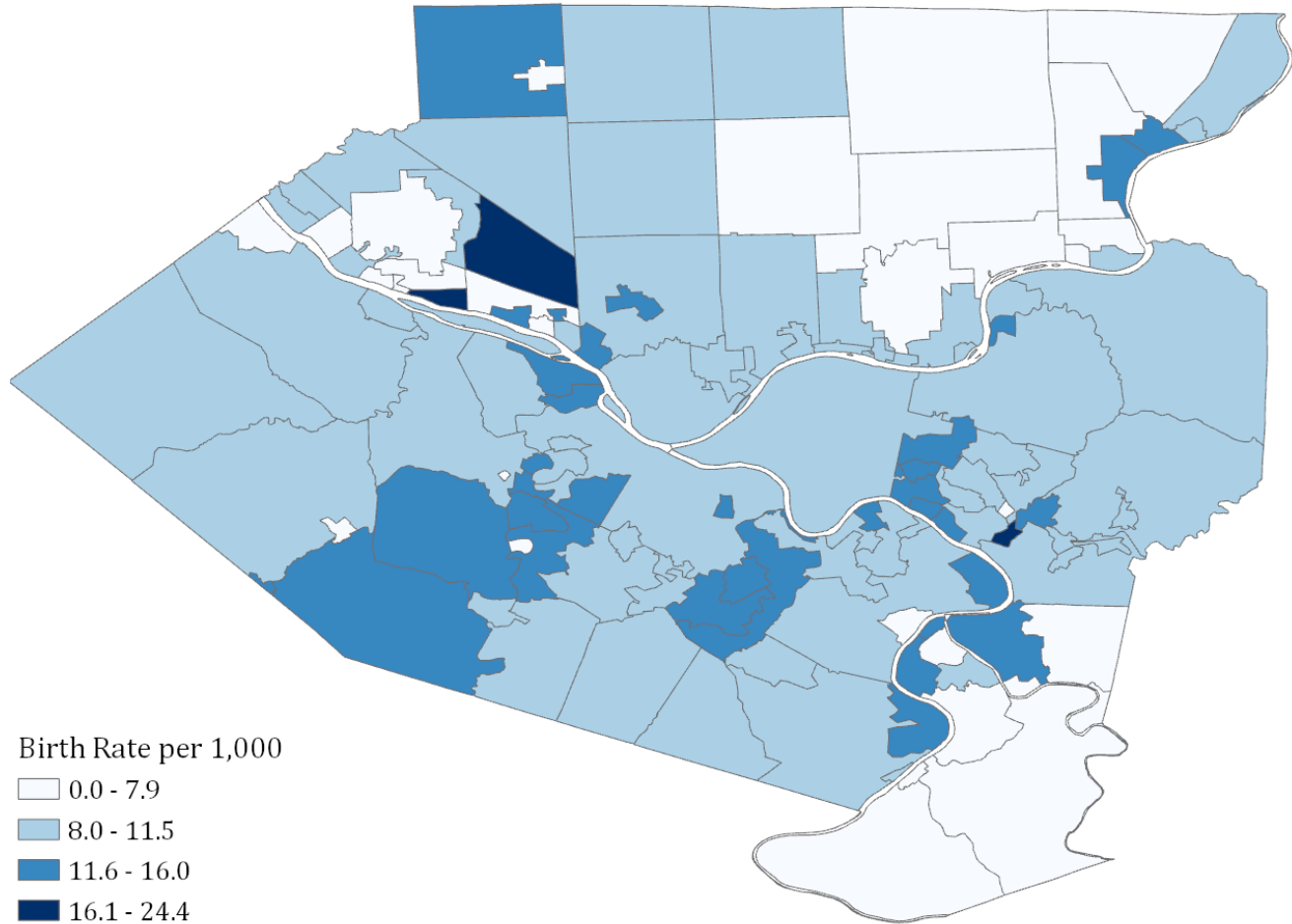




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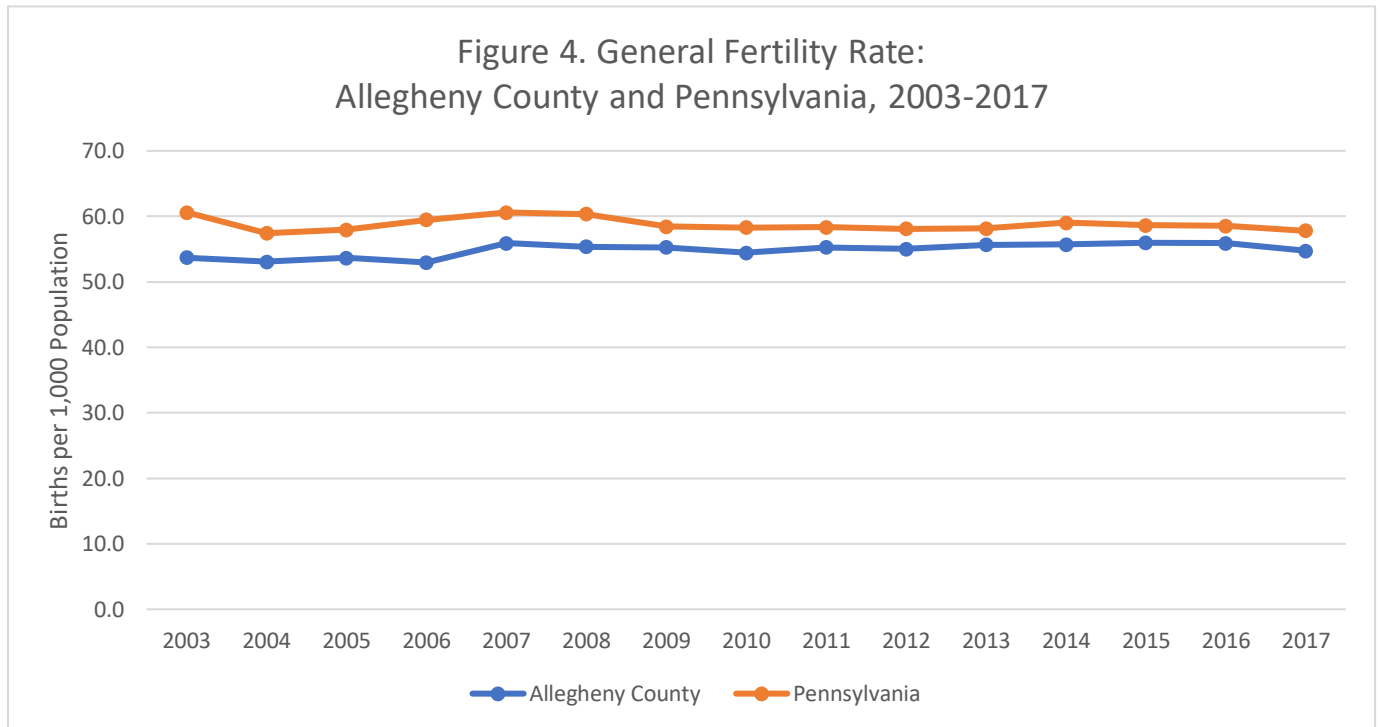
Figure 3. Crude birth rate per 1,000 population by Allegheny County municipality, 2017





General Fertility Rate

While crude birth rate is defined as the number of resident live births per 1,000 population out of the total resident population, the general fertility rate is defined as the number of resident live births per 1,000 population out of the total female resident population aged 15-44 years. In 2017, the Allegheny County general fertility rate was 54.7 per 1,000 women aged 15 through 44 years. This rate has decreased from 2016 (55.9 per 1,000). From 2003 through 2017, the general fertility rate for Allegheny County has been consistently lower than the general fertility rate for Pennsylvania, with Pennsylvania's rate at 57.8 per 1,000 in 2017. Since 2010, the general fertility rate for both Allegheny County and Pennsylvania has trended upward by an average of 0.03%, which is not significant.

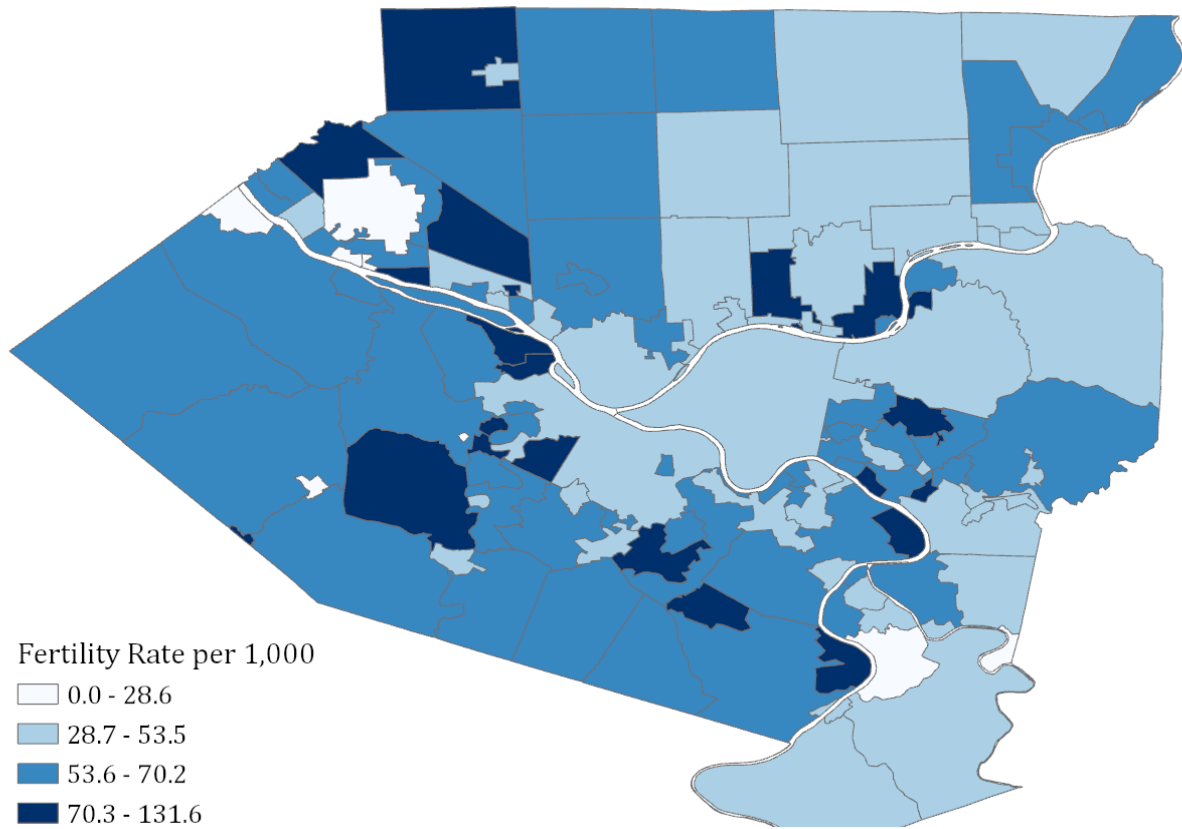




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Figure 5. General fertility rate per 1,000 population by Allegheny County municipality, 2017





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Table 1. Resident live births, crude birth rate, and general fertility rate: Allegheny County and Pennsylvania, 2003-2017

Year	Allegheny County					Pennsylvania				
	Number Live Births	Resident Population	Crude Birth Rate ^{a,c}	15-44 Population	General Fertility Rate ^{b,c}	Number Live Births	Resident Population	Crude Birth Rate ^{a,c}	15-44 Population	General Fertility Rate ^{b,c}
2003	13,561	1,261,303	10.8	252,627	53.7	145,485	12,365,455	11.8	2,517,212	57.8
2004	13,203	1,250,867	10.6	248,702	53.1	144,194	12,406,292	11.6	2,510,986	57.4
2005	13,002	1,235,841	10.5	242,234	53.7	145,033	12,429,616	11.7	2,501,821	58.0
2006	12,774	1,223,411	10.4	241,208	53.0	148,706	12,440,621	12.0	2,499,979	59.5
2007	13,368	1,219,210	11.0	239,102	55.9	150,322	12,432,792	12.1	2,480,627	60.6
2008	13,140	1,215,103	10.8	237,344	55.4	148,934	12,448,279	12.0	2,468,086	60.3
2009	13,100	1,218,494	10.8	237,041	55.3	145,472	12,604,767	11.5	2,488,188	58.5
2010	12,881	1,223,348	10.5	236,721	54.4	142,370	12,702,379	11.2	2,442,538	58.3
2011	13,098	1,227,066	10.7	237,007	55.3	142,021	12,742,886	11.1	2,433,256	58.4
2012	13,089	1,229,338	10.6	237,924	55.0	140,873	12,763,536	11.0	2,425,630	58.1
2013	13,291	1,231,527	10.8	238,711	55.7	140,424	12,773,801	11.0	2,414,538	58.2
2014	13,289	1,231,255	10.8	238,534	55.7	142,113	12,787,209	11.1	2,407,045	59.0
2015	13,308	1,230,459	10.8	237,807	56.0	140,727	12,802,503	11.0	2,400,883	58.6
2016	13,222	1,225,365	10.8	236,463	55.9	139,536	12,784,227	10.9	2,383,505	58.5
2017	12,958	1,223,048	10.6	236,792	54.7	137,771	12,805,534	10.8	2,383,721	57.8

^aCrude birth rate is per 1,000 population

^bGeneral fertility rate is per 1,000 women aged 15 through 44 years

^cSee Technical Notes for calculations of crude birth rate and general fertility rate



BIRTHWEIGHT

Birthweight was categorized into four groups: very low birthweight (VLBW), low birth weight (LBW), normal birthweight, and high birthweight. Very low birth weight (VLBW) is characterized as an infant weighing less than 1,500 grams at birth. Low birth weight (LBW) is defined as an infant weighing between 1,500 and 2,499 grams at birth. Infants born weighing between 2,500 grams and 3,999 grams were considered to have normal birthweight. Infants born weighing 4,000 grams or greater were categorized as having high birthweight.

The majority (82.0%) of all live births in 2017 were to children of normal birthweight. In 2017, 8.9% of all live births to Allegheny County residents were characterized as LBW, which is almost the same as the Pennsylvania's LBW percentage (8.5%). The percentage of LBW births in both the county and state has increased slightly since 2016 (8.4% and 8.2%, respectively). However, a total of 1.6% of all live births in 2017 for Allegheny County were considered VLBW, which is the same as the state's VLBW percentage of 1.6% for the same year.

Mothers aged 15 through 19 years had the highest percentage of very low birthweight infants (3.6%), while mothers aged 25 through 29 years had the highest percentage of low birthweight infants (11.5%). Mothers aged 30 through 34 years had the greatest percentage of high birthweight infants (9.7%).

The racial group with the highest percentage of LBW (15.3%) and VLBW (3.9%) children was Black. These percentages have risen since 2016 (14.9% and 3.5%, respectively). Asian/Pacific Islander mothers had the largest proportion of normal birthweight infants (85.2%).

In 2017, 9.8% of mothers reported smoking at least one cigarette during pregnancy. About 8% of mothers who did not smoke had LBW infants, while 18.9% of mothers who smoked had LBW infants. Mothers who smoked during pregnancy were 2.66 times more likely to have a low birthweight infant compared to mothers who never smoked (RR=2.66, 95% CI: (2.28, 3.12), $p<0.0001$). This association was also significant for very low birthweight infants (RR=2.23, 95% CI: (1.57, 3.17), $p<0.0001$).



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Table 2. Resident live births by birthweight and age and race/ethnicity: Allegheny County, 2017

	Birthweight									
	Total Births	VLBW ^a		LBW ^b		Normal ^c		High ^d		Unkn wn
		Number	% ^e	Number	%	Number	%	Number	%	Number
Age of Mother										
All Ages^f	12,958	209	1.6	1,160	9.0	10,627	82.7	1,064	8.3	108
10-14	5	0	ND ^g	1	ND	4	ND	0	ND	0
15-19	362	13	3.6	45	12.5	299	83.3	15	4.2	3
20-24	1,768	37	2.1	201	11.5	1,455	83.3	90	5.2	22
25-29	3,606	68	1.9	326	9.1	2,976	83.1	280	7.8	24
30-34	4,697	48	1.0	342	7.3	3,867	83.0	450	9.7	38
35-39	2,146	29	1.4	198	9.3	1,725	81.1	203	9.6	20
40-44	346	12	3.5	42	12.2	277	80.3	26	7.5	1
45-49	22	1	ND	3	ND	19	86.4	0	ND	0
50 & Over	5	0	ND	0	ND	5	ND	1	ND	0
Race/Ethnicity										
White	8,824	78	0.9	615	7.0	7,289	83.2	856	9.8	64
Black	2,663	104	4.0	406	15.4	2,100	79.9	124	4.7	33
Asian/PI^h	876	13	1.5	85	9.8	746	86.0	36	4.2	9
Multirace	342	13	3.8	34	10.0	280	82.1	27	7.9	1
Hispanicⁱ	301	4	ND	23	7.7	251	83.7	26	8.7	1

^aVLBW, very low birthweight, is defined as birthweight < 1,500 grams

^bLBW, low birthweight, is defined as birthweight < 2,500 grams

^c2,500 grams ≤ Normal birthweight < 4,000 grams

^dHigh birthweight is defined as ≥ 4,000 grams

^eUnknowns excluded from calculations

^fThere is 1 missing observation for age of mother

^gND = not displayed; Observations with less than 10 events are not statistically reliable so are censored

^hAsian/PI = Asian/Pacific Islander

ⁱHispanic ethnicity includes any race



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Figure 6. Percent Resident Live Births with Very Low and Low Birthweight by Race/Ethnicity of Mother: Allegheny County, 2017

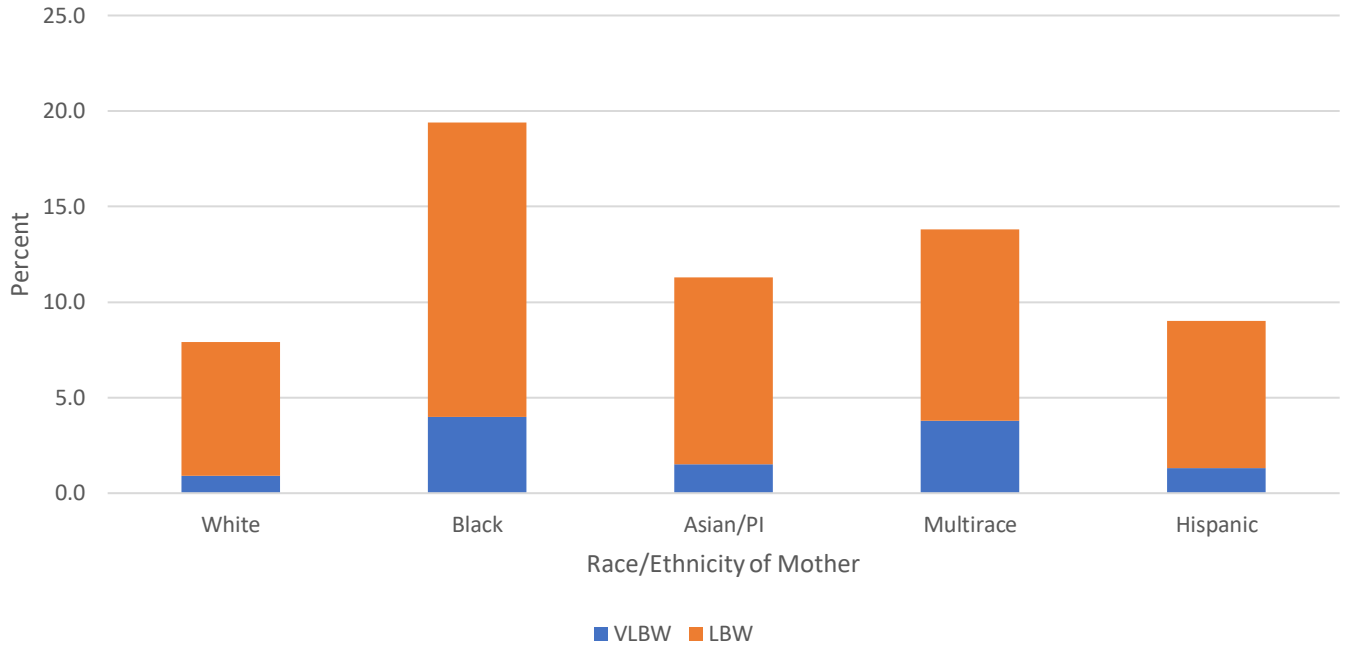
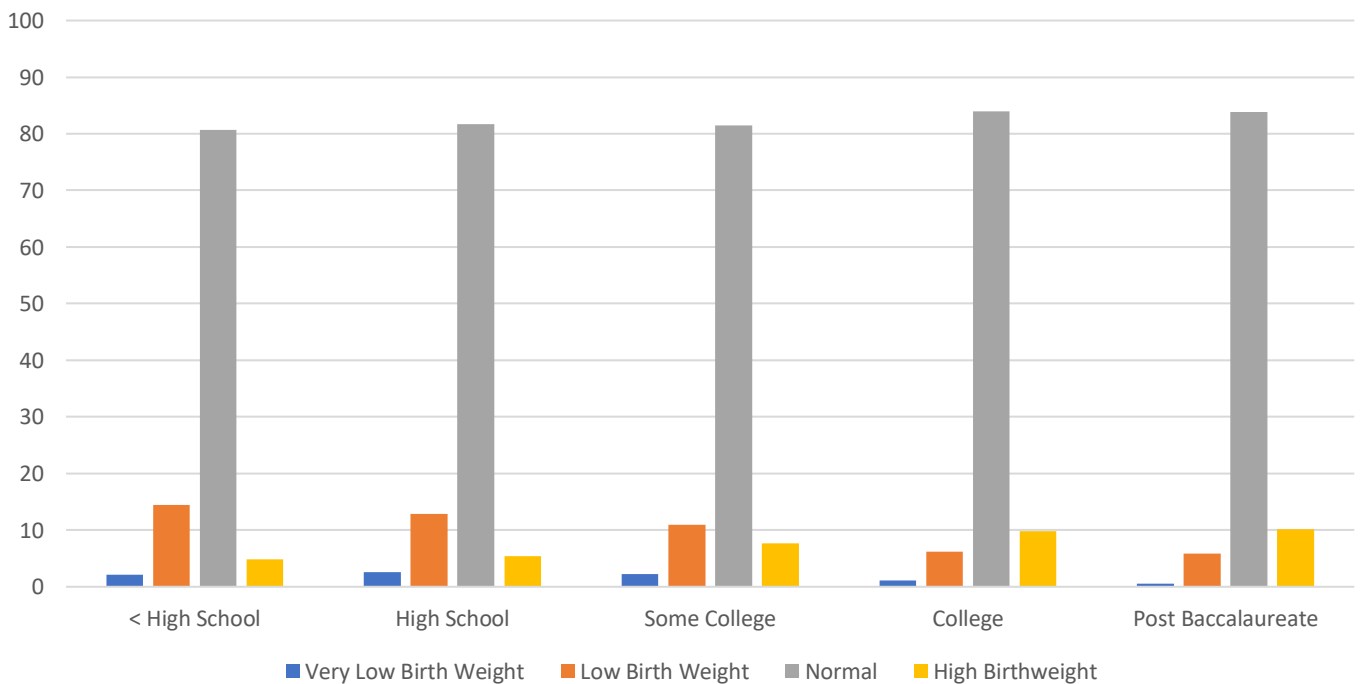


Figure 7. Percent Resident Live Births with Very Low, Low, Normal, and High Birthweight by Education of Mother: Allegheny County, 2017





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From 2003 through 2013, the percentages of resident live births with very low birthweight and with low birthweight for Allegheny County have overall remained consistent. The proportion of Allegheny County infants with very low birthweight increased from 1.2% in 2013 to 2.1% in 2016. From 2003 to 2017, the overall trend of very low birthweight infants in Allegheny County has been decreasing (APC: -1.90%). This is not true for low birthweight infants. From 2011 to 2017, the overall increase of low birth weight infants has been significant, with an average annual percent increase of 2.34%. Since 2016 alone, the number of low birth weight infants has increased by 4.65%.

Figure 8. Percent Resident Live Births with Very Low Birth Weight: Allegheny County and Pennsylvania, 2003-2017

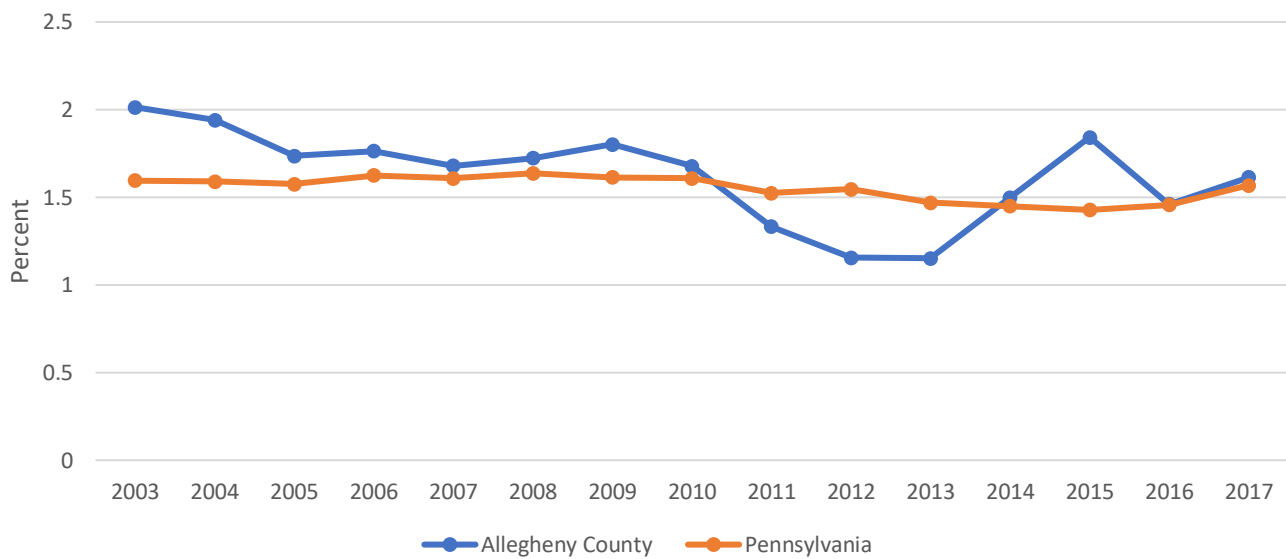


Figure 9: Percent Resident Live Births with Low Birth Weight: Allegheny County and Pennsylvania, 2003-2017

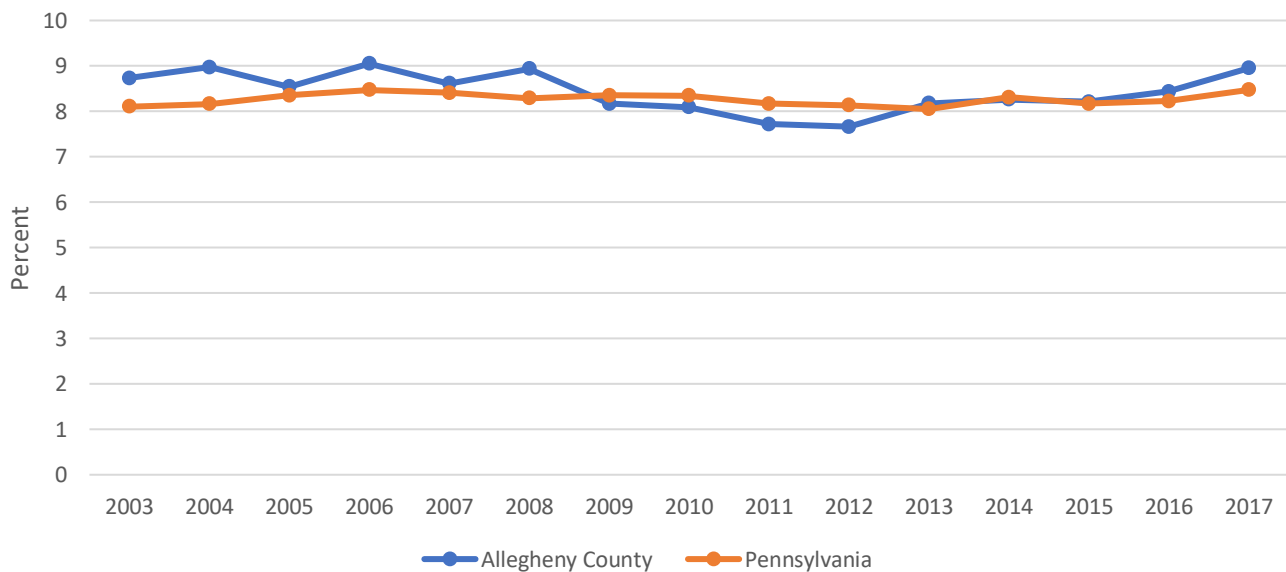
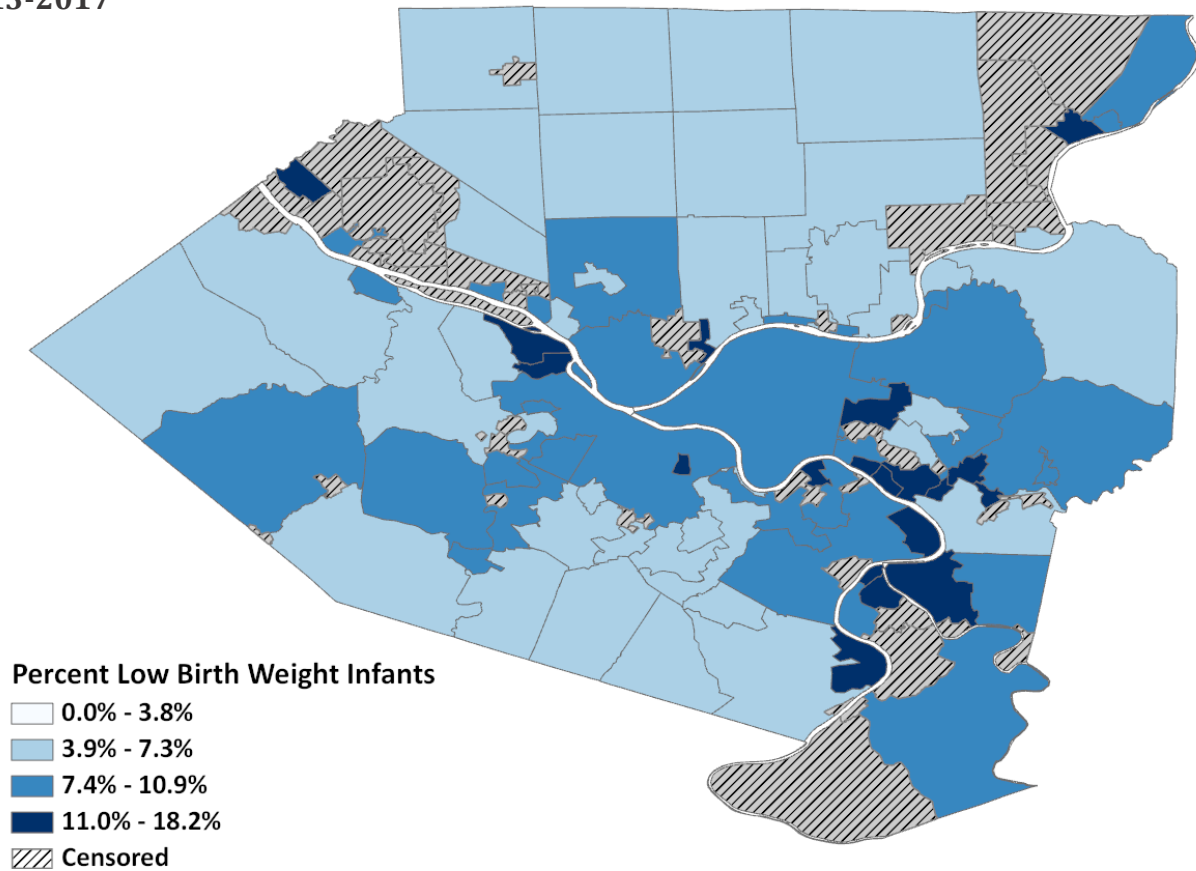


Figure 10. Five-year estimates of percent low birthweight by Allegheny County municipality, 2013-2017

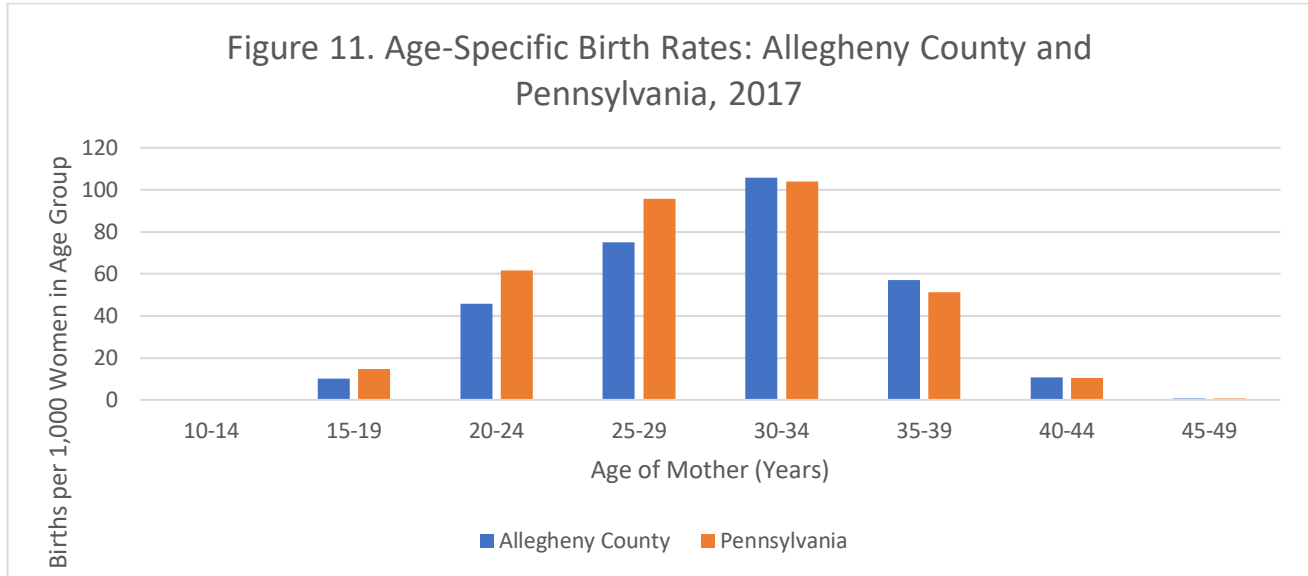


**Municipalities with less than 10 events are censored.*



MATERNAL AGE

In 2017, birth rates were greatest among women aged 30 to 34 years for both Allegheny County and Pennsylvania. Women aged 10 to 14 years of age had the lowest birth rate for both Allegheny County and Pennsylvania. The median age of mothers for Allegheny County was 30 years.



PRETERM BIRTH

Preterm birth is defined as a birth that occurs at less than 37 completed weeks of gestation. A total of 9.9% of all live births in 2017 were considered preterm, which is above the state’s percentage of preterm birth (9.4%). This is the first year since 2013 that the Allegheny County percentage of preterm birth was higher than the state.

Black mothers had the highest proportion of preterm births (15.7%) compared to all other races, while White mothers had the smallest proportion of preterm births (8.5%). The percentage of preterm births has increased for both Black and White mothers since 2016 (12.5% and 7.4%, respectively).

Nearly 16% of preterm births were to mothers who smoked at least one cigarette during pregnancy, which was significantly larger ($p < .0001$) than the 9.1% of preterm births that were to mothers who did not smoke any cigarettes during pregnancy. Mothers who smoked at least one cigarette during pregnancy were 1.8 times more likely (RR=1.84, 95% CI: (1.60, 2.17)) to experience a preterm birth compared to mothers who did not smoke during pregnancy.



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Table 3. Resident live births by preterm birth status (< 37 weeks gestation) and age, race/ethnicity, and smoking status during pregnancy of mother: Allegheny County, 2017

	Preterm Birth			Unknown Gestation
	Total Births	Number	% ^a	
County, total	12,958	1,269	9.9	91
PA, total	137,250	12,951	9.4	NP ^b
Age of Mother^c				
10-14	5	1	ND ^d	1
15-19	362	41	11.4	1
20-24	1,768	186	10.6	12
25-29	3,606	349	9.8	29
30-34	4,697	408	8.8	32
35-39	2,146	213	10.0	13
40-44	346	66	19.2	2
45-49	22	3	ND	1
50 & Over	5	1	ND	0
Race/Ethnicity				
White	8,824	741	8.5	59
Black	2,663	414	15.7	19
Asian/ Pacific Islander	876	55	6.3	6
Multirace	342	36	10.6	2
Hispanic ^e	301	21	7.1	4
Smoking During Pregnancy^c				
Yes	1,263	196	15.6	7
No	11,550	1,047	9.1	85
Unknown	145	25	17.2	0

^aUnknowns excluded from calculations

^bNP = Not provided information

^cThere is 1 missing observation for age of mother and 2 missing observations for smoking during pregnancy

^dND = not displayed; Observations with less than 10 events are not statistically reliable so are censored

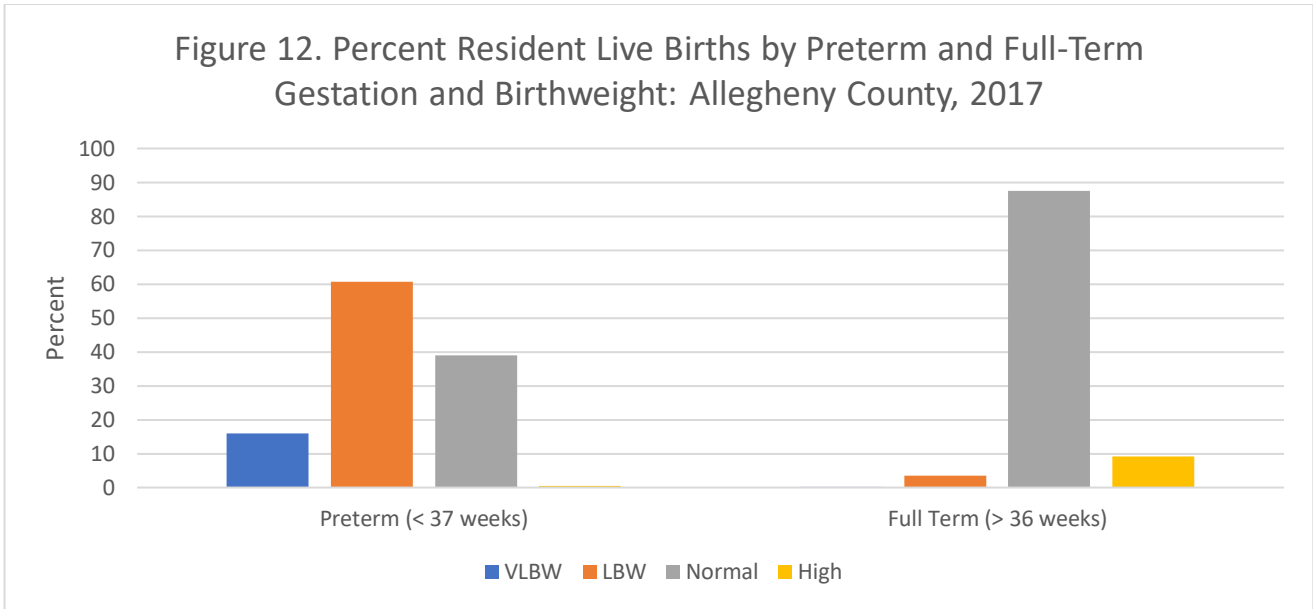
^eHispanic ethnicity includes any race

The majority of preterm births resulted in low birthweight children (60.6%), whereas only 3.5% of full term births resulted in children with low birthweight ($p < .0001$). The majority (87.4%) of infants born at full term had a normal birthweight.

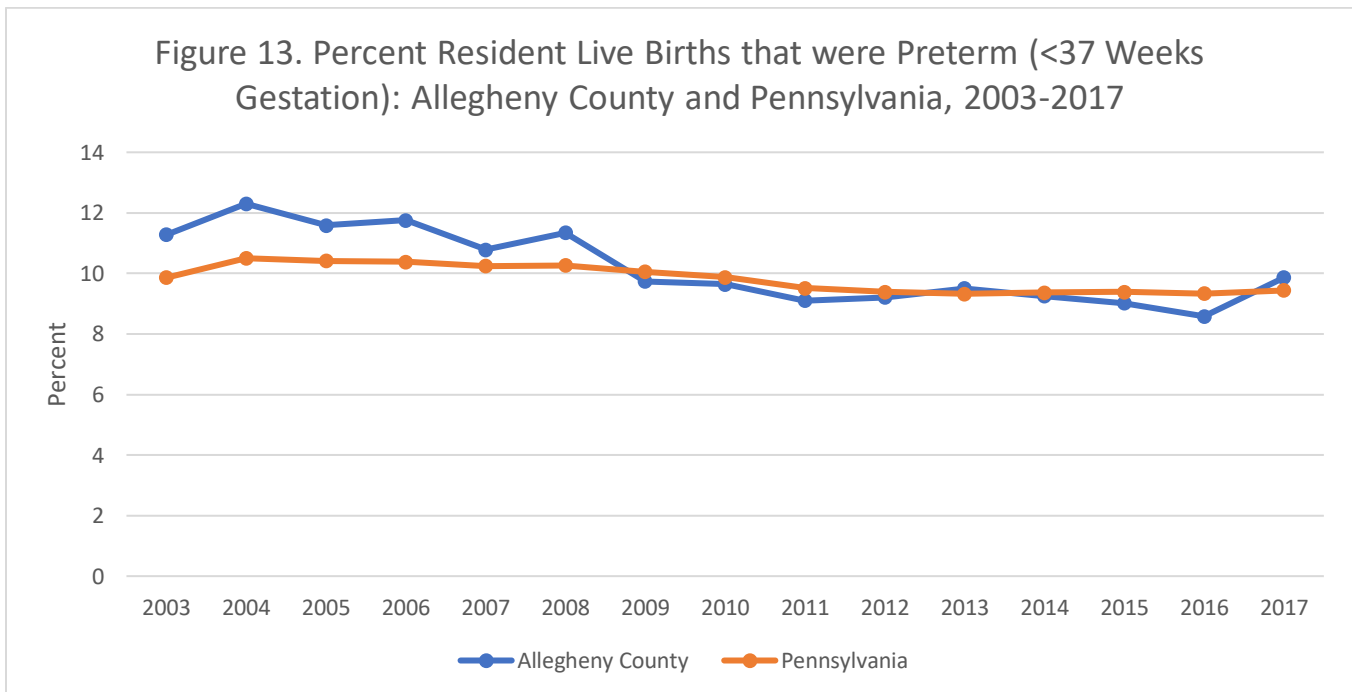


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From 2003 through 2017, the percent of resident preterm births were similar for Allegheny County and Pennsylvania. While the number of preterm births has increased significantly from 2016 to 2017 (8.6% to 9.9%), the overall trend since 2003 has been downward, with a significant average annual percent change (APC) of -2.20%. The state percentage remains mostly unchanged during this time period.





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Preterm birth was also categorized into four groups: extremely preterm (less than 28 weeks gestation), very preterm (28 to less than 32 weeks gestation), moderate to late preterm (32 to less than 37 weeks gestation), and full-term (37 and more weeks gestation). Black mothers had the greatest proportions of extremely and very preterm and moderate to late preterm births compared to all other races. Mothers who smoked at least one cigarette during pregnancy had a higher percentage of extremely, very, and moderate to late preterm births compared to mothers who did not smoke during their pregnancy.

Table 4. Resident live births by gestational age group and age, race/ethnicity, and smoking status during pregnancy of mother: Allegheny County, 2017

	Total Births	Preterm Birth								
		Extremely Preterm (< 28 weeks)		Very Preterm (28 to < 32 weeks)		Moderate to Late Preterm (32 to < 37 weeks)		Full-Term (> 36 weeks)		Unknown
		Number	% ^a	Number	%	Number	%	Number	%	Number
County, total	12,958	93	0.7	126	1.0	1,050	8.1	11,598	89.5	92
Age of Mother^b										
10-14	5	0	ND ^c	0	ND	1	ND	3	ND	1
15-19	362	7	ND	6	ND	28	7.8	320	88.6	1
20-24	1,768	22	1.3	15	0.9	149	8.5	1,570	89.4	12
25-29	3,606	30	0.8	39	1.1	280	7.8	3,228	90.2	29
30-34	4,697	18	0.4	39	0.8	351	7.5	4,257	91.3	32
35-39	2,146	13	0.6	21	1.0	179	8.4	1,920	90.0	13
40-44	346	3	ND	6	ND	57	16.6	278	80.8	2
45-49	22	0	ND	0	ND	3	ND	18	85.7	1
50 & Over	5	0	ND	0	ND	1	ND	4	ND	0
Race/Ethnicity										
White	9,214	42	0.5	53	0.6	583	6.4	8,459	92.6	77
Black	2,544	44	1.8	44	1.8	227	9.0	2,195	87.5	34
Asian/PI^d	877	6	ND	9	ND	54	6.2	800	92.1	8
Multirace	346	2	ND	5	ND	36	10.5	300	87.5	3
Hispanic^e	300	2	0.7	2	ND	20	7.0	260	91.5	16
Smoking During Pregnancy^b										
Yes	1,263	14	1.1	21	1.7	161	12.8	1,060	84.4	7
No	11,550	73	0.6	105	0.9	869	7.6	10,418	90.9	85
Unknown	145	5	ND	0	ND	20	13.8	120	82.8	0

^aUnknowns excluded from calculations

^bThere is 1 missing observation for age of mother and 2 missing observations for smoking during pregnancy

^cND = not displayed; Observations with less than 10 events are not statistically reliable so are censored

^dAsian/PI = Asian/Pacific Islander

^eHispanic ethnicity includes any race



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As completed gestational weeks increased, the proportion of very low and low birthweight infants decreased, and normal and high birthweight infants increased. About 94% of extremely preterm infants had very low birthweights, while less than 0.1% of full-term infants had very low birthweights. About 4.8% of extremely preterm infants had normal birthweights compared to 87.4% of full-term infants.

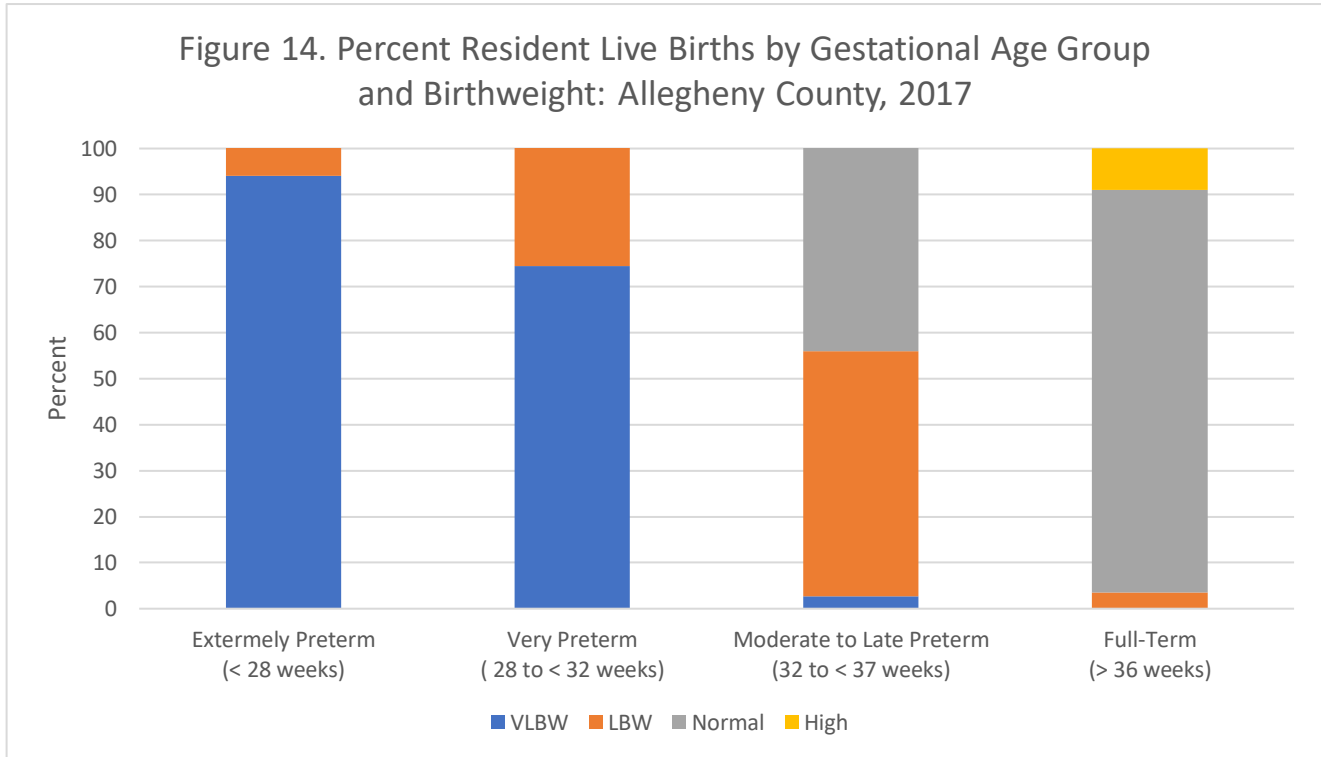
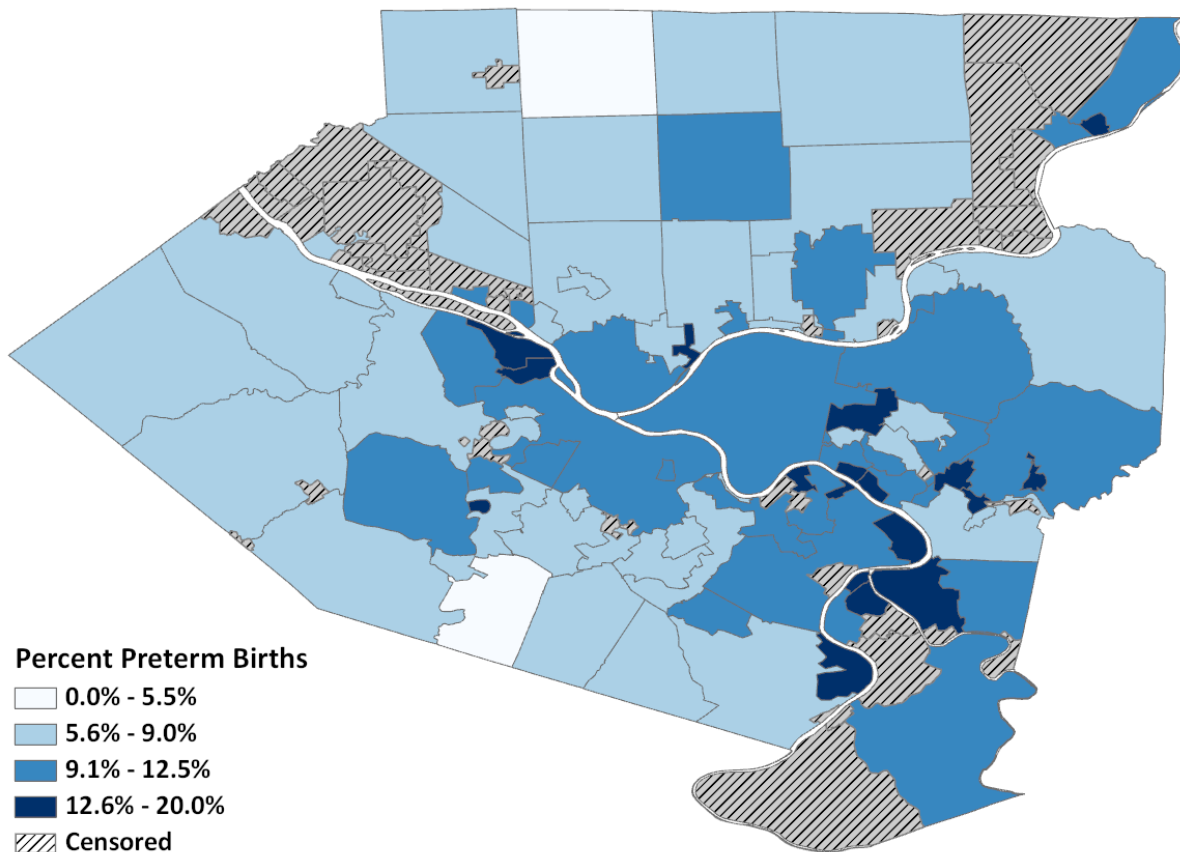


Figure 15. Five-year estimates of percent preterm births by Allegheny County municipality, 2013-2017



**Municipalities with less than 10 events are censored.*

BIRTHS TO TEEN MOTHERS

Births to mothers aged 15-19 years were considered teen births, and births to mothers of all other ages were considered non-teen births. Teen births comprised 2.8% of all live births, which was less than the state's percentage of teen births (4.3%). The percentage of teen births in Allegheny County has decreased from 2016 (3.2%).

Black mothers had the largest proportion of teen mothers (7.8%), while white mothers had the smallest proportion of teen mothers (1.3%). Both have decreased since 2016 (previously 9.5% and 1.6%, respectively).

Teen mothers had a slightly higher rate of smoking at least one cigarette during pregnancy than non-teen mothers (12.3% vs. 9.8%). Teen mothers also had higher rates of being enrolled in WIC (70.1% vs. 23.6%) and Medicaid (67.1% vs. 27.2%). Non-teen mothers more commonly intended to breastfeed (80.7% vs. 57.5%) and had higher rates of being enrolled in private insurance (68.4% vs. 28.5%). Teen mothers were



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almost 50% more likely to have a low birthweight baby compared to non-teen mothers (RR=1.46, 95%CI: (1.06, 2.01), p=0.0243).

The rate of births to teen mothers in Allegheny County decreased from 23.0 per 1,000 females aged 15-19 years in 2003 to 10.2 per 1,000 females aged 15-19 years in 2017. This rate also decreased for Pennsylvania, from 28.9 per 1,000 females ages 15-19 years in 2003 to 14.7 per 1,000 females aged 15-19 years in 2016. From 2003 to 2017, the overall average annual percent decrease per year has been 4.46%. This decrease was even more apparent from 2011 to 2017, with a significant average APC of -8.78%. Since 2016 alone, the rate of teen births has decreased by about 13.5%. From 2003 through 2017, the rate of births to teen mothers in Allegheny County has been less than that of Pennsylvania.

Table 5. Resident live births to teen mothers (15-19 years) and non-teen mothers (all other ages) by race/ethnicity and smoking during pregnancy of mother: Allegheny County, 2017

	Total Births	Teen Mothers		Non-Teen Mothers		Unknown
		Number	% ^a	Number	%	Number
County, total	12,958	362	2.8	12,597	97.2	0
PA, total	137,743	5,874	4.3	131,869	95.7	NP ^b
Race/Ethnicity						
White	8,824	116	1.3	8,708	98.7	0
Black	2,663	207	7.8	2,455	92.2	0
Asian/Pacific Islander	876	7	ND ^c	869	99.2	0
Multirace	342	23	6.7	319	93.3	0
Hispanic^d	301	15	5.0	286	95.0	2
Smoking During Pregnancy^e						
Yes	1,263	43	3.4	1,220	96.6	0
No	11,550	306	2.7	11,242	97.4	0

^aUnknowns excluded from calculations

^bNP = Not provided information

^cND = not displayed; Observations with less than 10 events are not statistically reliable so are censored

^dHispanic ethnicity includes any race

^eThere are 145 unknown observations for smoking during pregnancy



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Figure 16. Birth Rate for Teen Mothers Aged 15-19 Years: Allegheny County and Pennsylvania, 2003-2017

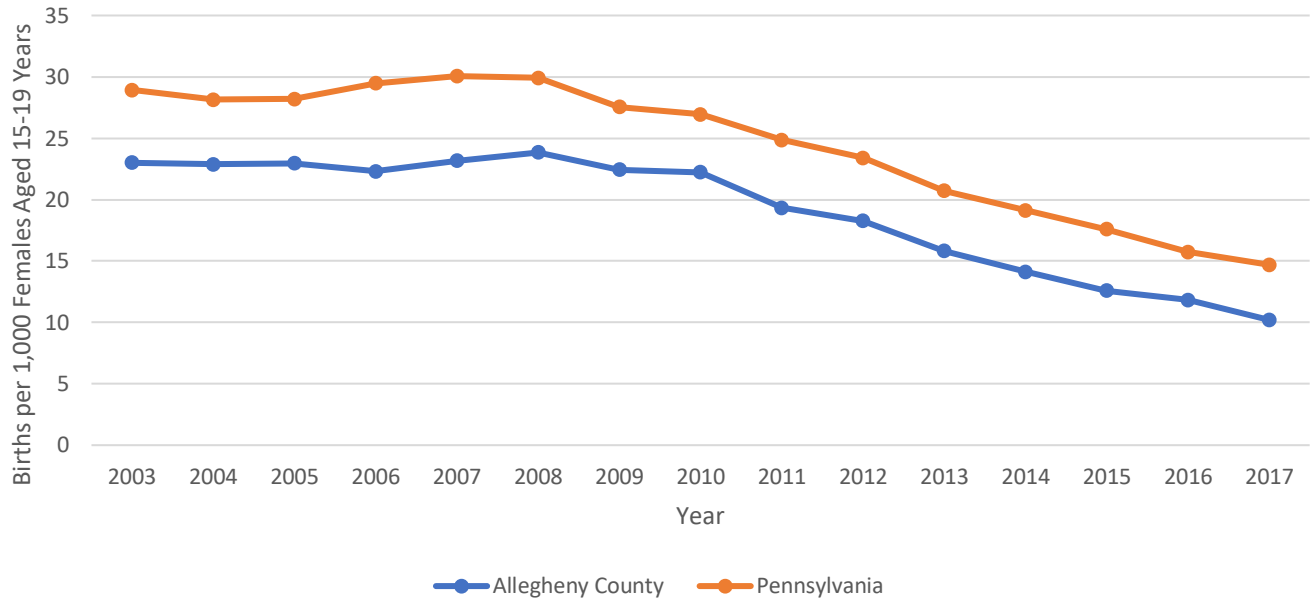
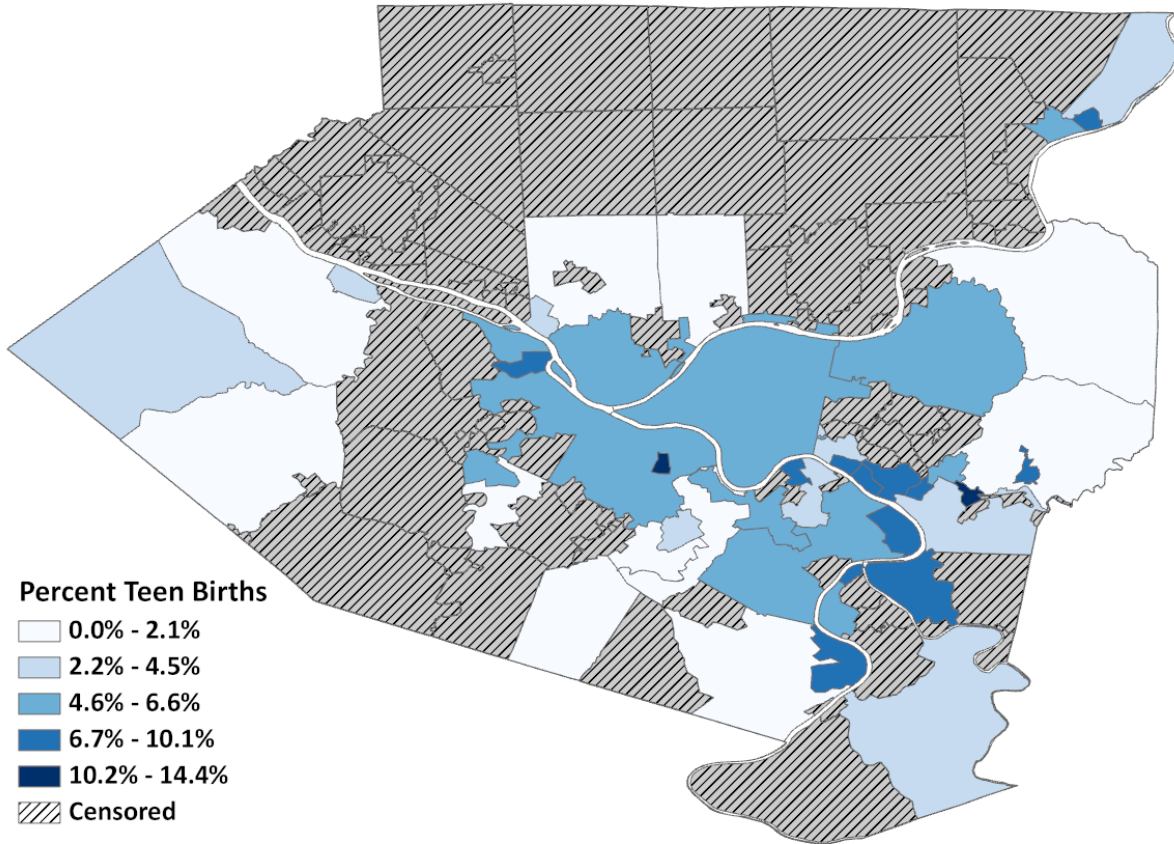


Figure 17. Five-year estimates of percent teen births by Allegheny County municipality, 2013-2017



**Municipalities with less than 10 events are censored.*

SMOKING DURING PREGNANCY

Overall, 9.9% of Allegheny County mothers in 2017 smoked at least one cigarette during their pregnancy. This was also true in 2016. Mothers aged 20 through 24 years had the largest proportion of smoking during pregnancy (16.7%), while mothers aged 40 through 44 years had the smallest proportion of smoking during pregnancy (5.2%). While smoking has decreased in nearly all age groups from 2016, it has increased in mothers aged 30 through 34 years from 6.6% in 2016 to 6.9% in 2017.

Mothers who identified as multirace represented the largest proportion of smoking during pregnancy (16.1%), while Hispanic mothers had the smallest proportion of smoking during that time (6.3%). As education of mother increased, the percentage of smoking decreased.



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Table 6: Resident live births by smoking status and age of mother: Allegheny County, 2017

Age of Mother	Total Births	Smoking Status During Pregnancy ^a				
		Yes		No		Unknown
		Number	% ^b	Number	%	Number
All Ages^c	12,958	1,263	9.9	11,549	90.1	145
10-14	5	0	ND ^d	5	ND	0
15-19	362	43	11.9	306	84.5	13
20-24	1,768	295	16.7	1,450	82.0	23
25-29	3,606	428	11.9	3,139	87.1	38
30-34	4,697	323	6.9	4,324	92.1	50
35-39	2,146	155	7.2	1,972	91.9	19
40-44	346	18	5.2	326	94.2	2
45-49	22	1	ND	21	95.5	0
50 & Over	5	0	ND	5	ND	0

^aSmoking status is defined as smoking at least one cigarette in the first, second, or last trimester of pregnancy

^bUnknowns excluded from calculations

^cThere are 2 missing observations for age of mother

^dND = not displayed; Observations with less than 10 events are not statistically reliable so are censored

Table 7: Resident live births by smoking status and race/ethnicity and education of mother: Allegheny County, 2017

Race/Ethnicity	Total Births	Smoking Status During Pregnancy ^a				
		Yes		No		Unknown
		Number	% ^b	Number	%	Number
White	8,824	824	9.3	7,913	89.7	86
Black	2,663	363	13.6	2,249	84.5	51
Asian/Pacific Islander	876	3	ND ^c	871	99.4	2
Multirace	342	55	16.1	285	83.3	2
Hispanic^d	301	19	6.3	278	92.4	6
Education of Mother^f						
< High School	671	210	31.3	450	67.1	11
High School	2,456	551	22.4	1,872	76.2	33
Some college	3,022	425	14.1	2,556	84.6	40
College	3,750	61	1.6	3,655	97.5	34
Post Baccalaureate	2,992	8	ND	2,968	99.2	16

^aSmoking status is defined as smoking at least one cigarette in the first, second, or last trimester of pregnancy

^bUnknowns excluded from calculations

^cND = Not Displayed; Observations with less than 10 events are not statistically reliable so are censored

^dHispanic ethnicity includes any race

^eThere are 41 unknown observations for education of mother



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From 2003 through 2017, the percent of smoking at least one cigarette during each trimester of pregnancy decreased in both Allegheny County and Pennsylvania. The overall percent of smoking during pregnancy in Allegheny County decreased from 18.1% in 2003 to 9.9% in 2017, while decreasing from 17.7% in 2003 to 11.1% in 2017 in Pennsylvania. The average APC for Allegheny County from 2008 to 2017 was significant at -6.39% per year. The proportion of mothers who smoked during pregnancy has decreased by 0.9% since 2016.

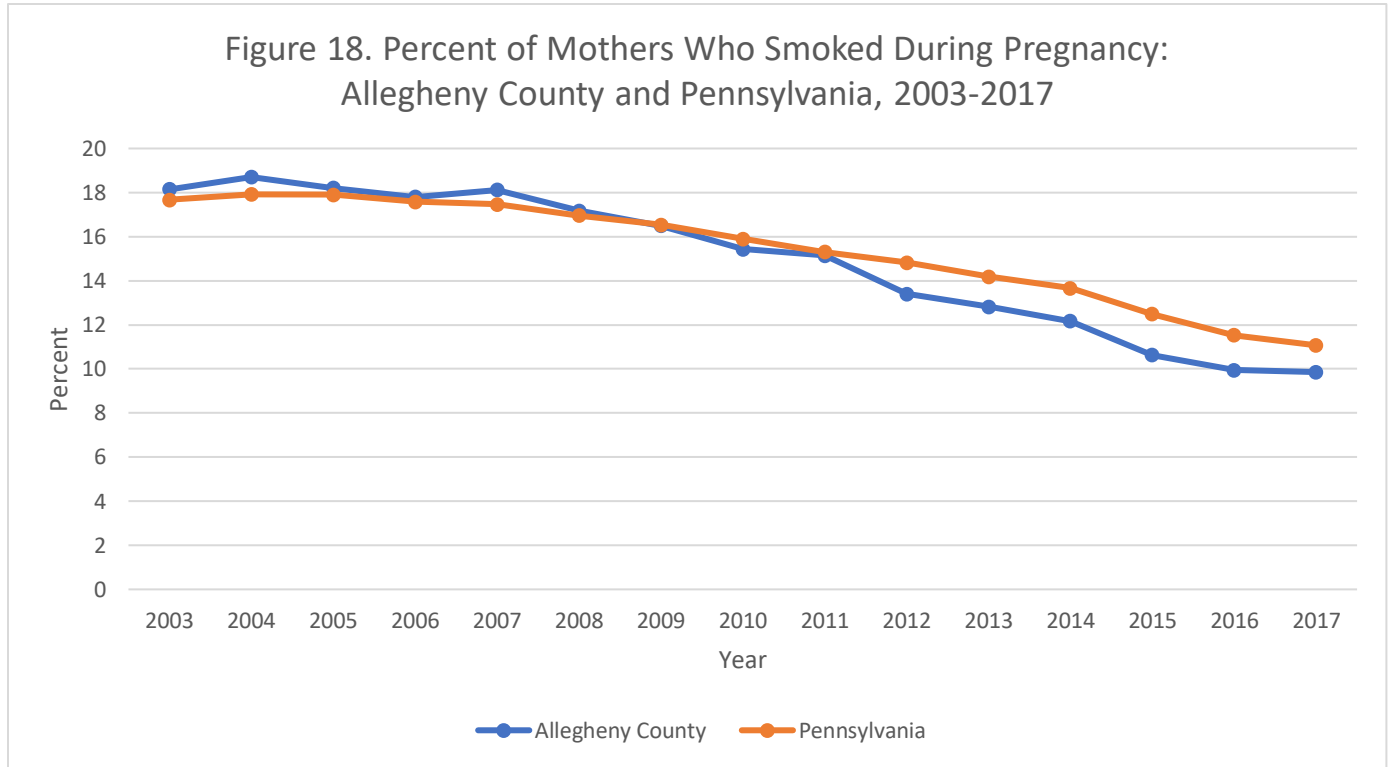
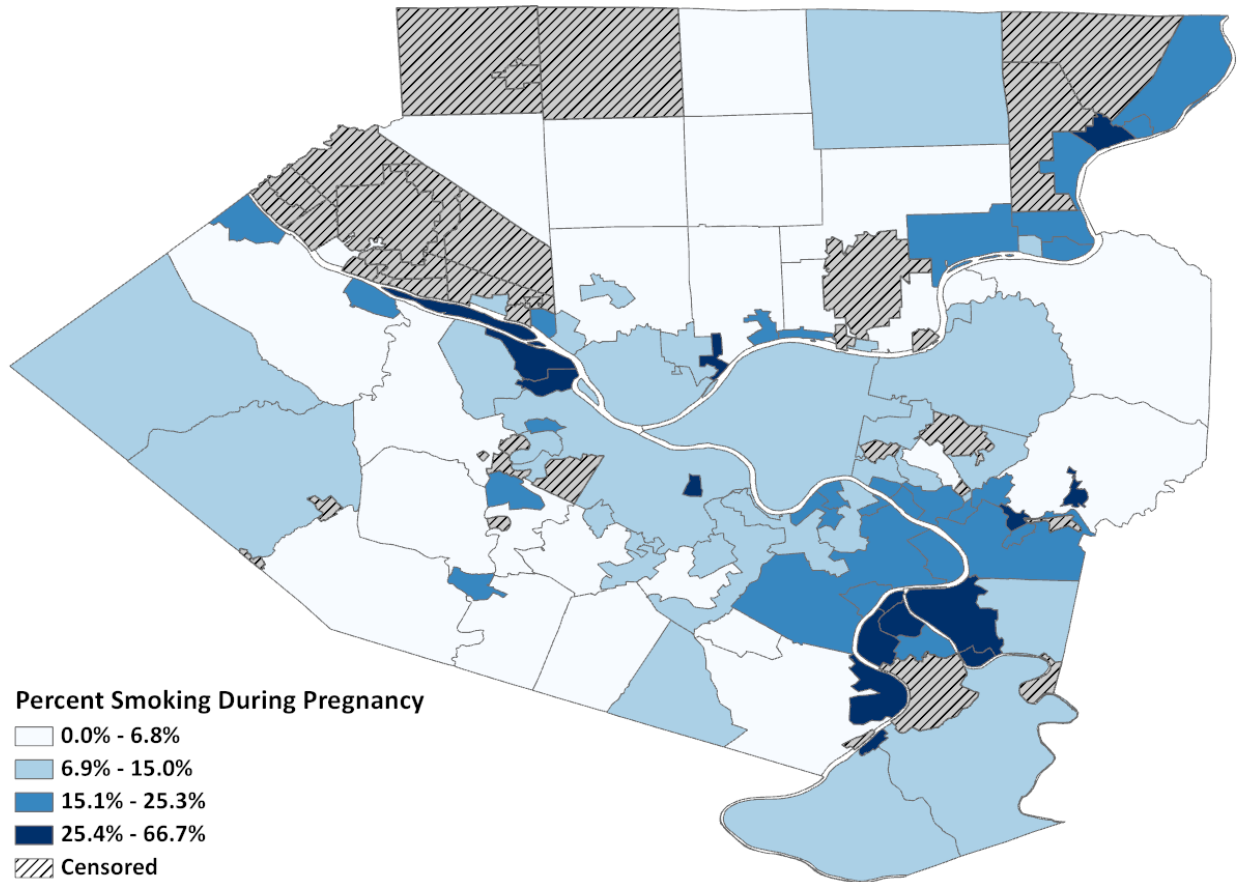


Figure 19. Five-year estimates of percent smoking during pregnancy by Allegheny County municipality, 2013-2017



**Municipalities with less than 10 events are censored.*

SMOKING CESSATION

Smoking cessation was defined as when a woman reported smoking cigarettes at least three months prior to becoming pregnant to reporting never smoking during their pregnancy. Out of the 1,514 who smoked in the three months prior to pregnancy, 250 (16.7%) women did not smoke during their pregnancy. 1,250 (83.3%) women smoked at least one cigarette during their pregnancy, and 13 (0.9%) had an unknown smoking status during their pregnancy.

Mothers aged 15 through 19 years of age had the highest proportion of smoking cessation (17.3%), and mothers aged 30 through 34 years of age had the smallest proportion (15.3%). Women who identify as multirace and have post baccalaureate education had the largest percentages of smoking cessation (19.4% and 66.7%, respectively). Overall, as the mother’s educational attainment increased, the percentage of smoking cessation increased.



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Table 8: Resident live births by smoking cessation and age of mother: Allegheny County, 2017

Age of Mother	Total Births ^b	Smoking Cessation ^a				
		Yes		No		Unknown
		Number	% ^c	Number	%	Number
All Ages^d	1,514	250	16.7	1,250	83.3	13
10-14	0	0	ND ^e	0	ND	0
15-19	52	9	17.3	43	82.7	0
20-24	353	57	16.5	292	82.7	4
25-29	518	89	17.2	424	82.0	4
30-34	379	58	15.3	318	83.9	3
35-39	187	31	16.6	154	82.4	2
40-44	24	6	ND	18	75.0	0
45-49	1	0	ND	1	ND	0
50 & Over	0	0	ND	0	ND	0

^aSmoking cessation is defined as when a woman changed from reporting smoking at least one cigarette in the three months prior to pregnancy to reporting never smoking during their pregnancy

^b1,514 is the number of women who smoked at least one cigarette in the three months prior to pregnancy

^cUnknowns excluded from calculations

^dThere are 2 missing observations for age of mother

Table 9: Resident live births by smoking cessation and race/ethnicity and education of mother: Allegheny County, 2017

Race/Ethnicity	Total Births	Smoking Cessation ^a				
		Yes		No		Unknown
		Number	% ^b	Number	%	Number
White	1,016	187	18.6	819	81.4	9
Black	403	44	11.0	356	89.0	3
Asian/Pacific Islander	4	1	ND ^c	3	ND	0
Multirace	67	13	19.4	54	80.6	0
Hispanic^d	28	8	ND	19	70.4	1
Education of Mother^f						
< High School	225	16	7.1	209	92.9	0
High School	623	71	11.5	548	88.5	4
Some college	535	110	20.8	418	79.2	6
College	98	36	37.9	59	62.1	3
Post Baccalaureate	24	16	66.7	8	ND	0

^aSmoking cessation is defined as when a woman changed from reporting smoking at least one cigarette in the three months prior to pregnancy to reporting never smoking during their pregnancy

^bUnknowns excluded from calculations^cND = Not Displayed; Observations with less than 10 events are not statistically reliable so are censored

^dHispanic ethnicity includes any race



TRIMESTER OF AND PRENATAL CARE

The trimester of the first prenatal care visit was calculated from the date of the last normal menses and the date of the first prenatal care visit. Out of the 12,516 mothers with known trimester of first prenatal care visit, the majority (86.6%) received care in the first trimester, which is greater than Pennsylvania's percentage of 73.4% in 2017. A total of 69 (0.6%) mothers with known trimester of first prenatal care visit did not receive any prenatal care during pregnancy, which is smaller than Pennsylvania's percentage (1.6%) in 2017.

Mothers aged 40 through 44 years had the largest proportion of first prenatal care visits in the first trimester (89.4%), while mothers aged 15 through 19 years had the smallest proportion (80.0%).

The racial group with the lowest percentage of first prenatal care visits in the first trimester were multirace mothers (69.6%), while Asian/Pacific Islander mothers had the highest percentage (88.2%). Multirace mothers also had the largest percentage of first prenatal care visits in the second and third trimester (21.5% and 8.0%, respectively). Black mothers had the largest percentage of no prenatal visits (0.9%). Prenatal care during the first trimester increases significantly with increasing education level of the mother (79.9% for less than high school, 90.1% for post baccalaureate).

Table 10: Resident live births by trimester of first prenatal visit and age of mother: Allegheny County, 2017

Age of Mother	Total Births	Trimester in Pregnancy ^a						No Prenatal Visits		Unknown
		First Trimester		Second Trimester		Third Trimester		Number	%	
		Number	% ^b	Number	%	Number	%			
All Ages^c	12,958	10,845	86.6	1,209	9.7	394	3.2	69	0.6	442
10-14	5	4	ND ^d	0	ND	0	ND	1	ND	0
15-19	362	280	80.0	49	14.0	21	6.0	3	ND	9
20-24	1,768	1,399	82.0	214	12.5	94	5.5	15	0.9	46
25-29	3,606	3,032	87.3	354	10.2	84	2.4	19	0.5	117
30-34	4,697	3,979	88.3	398	8.8	128	2.8	20	0.4	172
35-39	2,146	1,843	89.3	162	7.8	60	2.9	9	ND	72
40-44	346	296	89.4	28	8.5	7	ND	2	ND	13
45-49	22	16	84.2	3	ND	0	ND	0	ND	3
50 & Over	5	5	ND	0	ND	0	ND	0	ND	0

^aSee Technical Notes for explanation on trimester in pregnancy calculation

^bUnknowns excluded from calculations

^cThere are 2 missing observations for age of mother

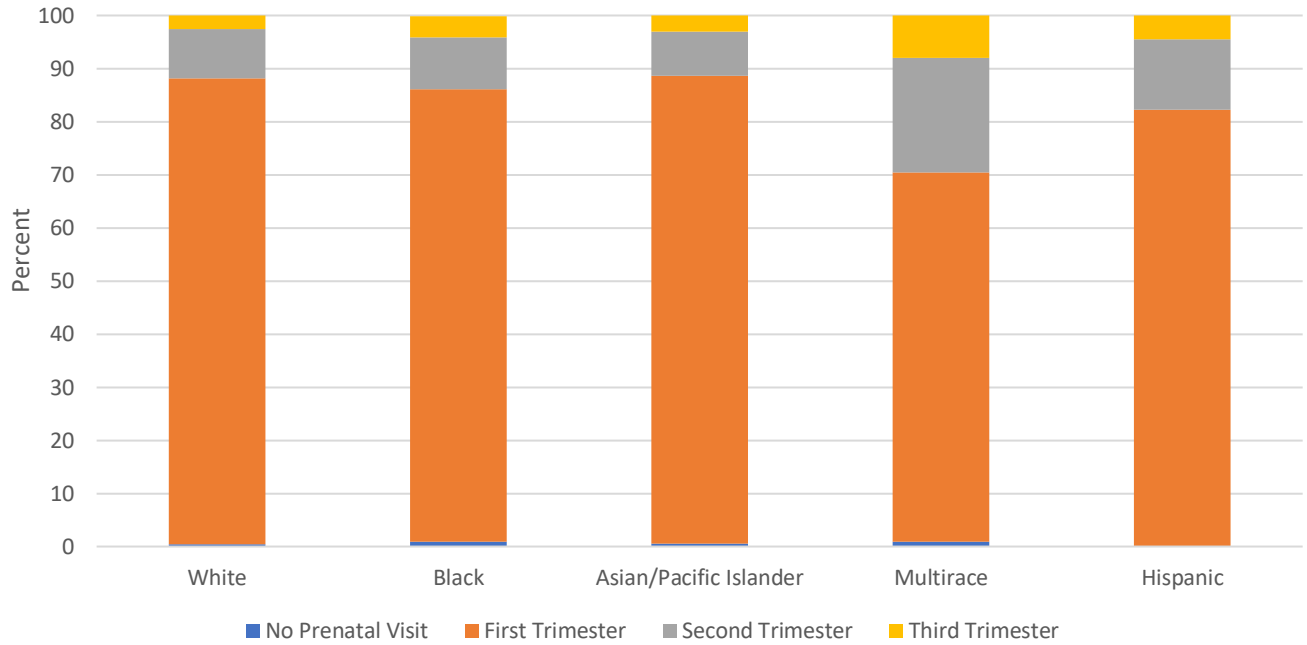
^dND = not displayed; Observations with less than 10 events are not statistically reliable so are censored



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Figure 20. Percent of Mother's Race/Ethnicity by Trimester of First Prenatal Care Visit: Allegheny County, 2017





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Table 11: Resident live births by trimester of first prenatal visit and race/ethnicity and education of mother: Allegheny County, 2017

	Trimester in Pregnancy ^a									
	Total Births	First Trimester		Second Trimester		Third Trimester		No Prenatal Visits		Unknown
		Number	% ^b	Number	%	Number	%	Number	%	Number
Race/Ethnicity										
White	8,824	7,470	87.7	790	9.3	223	2.6	34	0.4	307
Black	2,663	2,193	85.2	253	9.8	104	4.0	24	0.9	89
Asian/Pacific Islander	876	756	88.2	71	8.3	26	3.0	4	ND ^c	19
Multirace	342	227	69.6	70	21.5	26	8.0	3	ND	16
Hispanic^d	301	237	82.3	38	13.2	13	4.5	0	ND	13
Education of Mother^f										
< High School	671	524	79.9	74	11.3	50	7.6	8	ND	15
High School	2,456	2,050	85.4	256	10.7	69	2.9	26	1.1	55
Some college	3,022	2,438	83.9	339	11.7	110	3.8	18	0.6	117
College	3,750	3,205	88.5	313	8.6	97	2.7	7	ND	128
Post Baccalaureate	2,992	2,594	90.1	214	7.4	67	2.3	3	ND	114

^aSee Technical Notes for explanation on trimester in pregnancy calculation

^bUnknowns excluded from calculations

^cND = not displayed; Observations with less than 10 events are not statistically reliable so are censored

^dHispanic ethnicity includes any race

^fThere are 41 additional unknown observations for education of mother



DELIVERY METHOD

A majority of births in Allegheny County in 2017 were delivered vaginally (69.9%) compared to via Cesarean (30.1%); however, the percentage of Cesarean deliveries has slightly increased since 2016 (29.7%). The 2017 percentages are similar to that of Pennsylvania, where 69.5% of Pennsylvanian mothers delivered vaginally and 30.5% delivered via Cesarean. The percent of Cesarean delivery increased and vaginal delivery decreased as age of mother increased for mothers in both Allegheny County and in Pennsylvania. Delivery method does not appear to differ among race or education level of the mother.

Overall, the percent of the cesarean delivery method has slightly increased since 2003 by about 0.7% per year in both Allegheny County and Pennsylvania. However, while the number of cesarean deliveries has increased by 1.34% since 2016, there has been an average decrease that is significantly different from zero (-0.69% per year) since 2009.

Table 12: Resident live births by delivery method and age of mother: Allegheny County, 2017

	Method of Delivery				
	Total Births	Vaginal		Cesarean	
		Total Number	%	Total Number	%
County, total	12,958	9,054	69.9	3,904	30.1
PA, total	137,725	95,670	69.5	42,055	30.5
Age of Mother					
10-14	5	4	ND ^b	1	ND
15-19	362	288	79.6	74	20.4
20-24	1,768	1,327	75.1	441	24.9
25-29	3,606	2,604	72.2	1,002	27.8
30-34	4,697	3,273	69.7	1,424	30.3
35-39	2,146	1,358	63.3	787	36.7
40-44	346	183	52.9	163	47.1
45-49	22	14	63.6	8	36.4
50 & Over	5	3	ND	2	ND

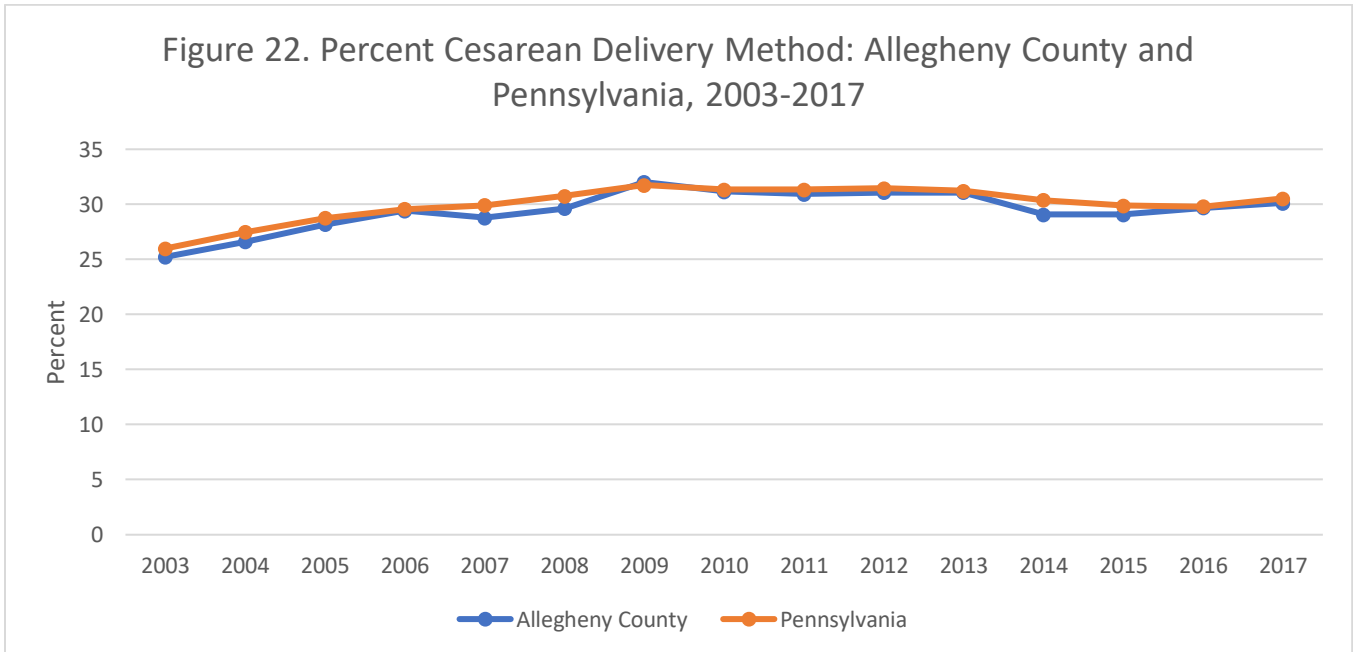
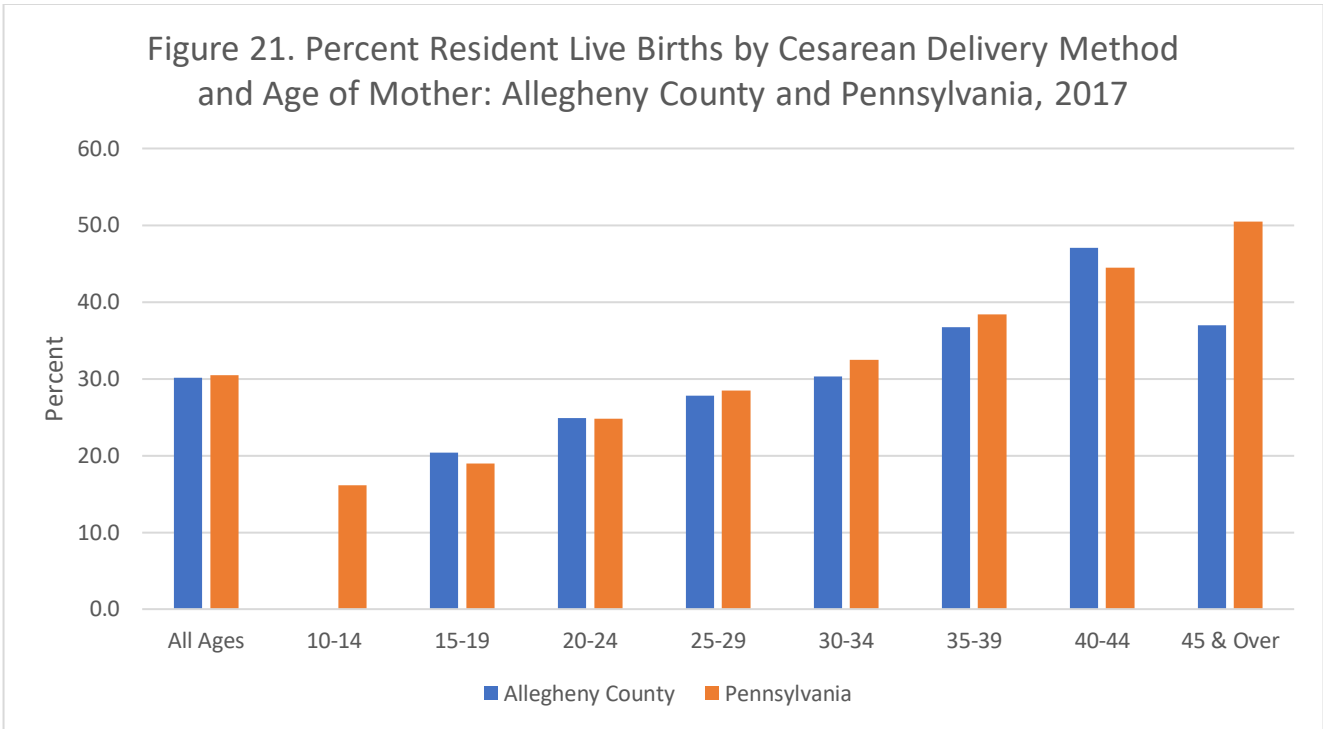
^aThere is 1 missing observation for age of mother

^bND = not displayed; Observations with less than 10 events are not statistically reliable so are censored



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INTENT TO BREASTFEED

A total of 10,238 (80.0%) of Allegheny County women in 2017 with known breastfeeding intention intended to breastfeed. This is less than the 81.8% of Pennsylvanian women who intended to breastfeed in 2017. The age group with the largest percent of intention to breastfeed was 30 through 34 years of age (85.5%), while the age group with the smallest percent of intention to breastfeed was 15 through 19 years of age (57.5%). Mothers who identified as Asian/Pacific Islander had the greatest percentage of intention to breastfeed (94.3%), while Black mothers had the smallest proportion of intention to breastfeed (66.1%). As educational attainment increased, the percent intention to breastfeed increased. About 53% of mothers with less than a high school education intended to breastfeed compared to 93.3% of mothers with a post baccalaureate degree.

Table 13: Resident live births by intent to breastfeed and age of mother: Allegheny County, 2017

Age of Mother	Total Births	Intend to Breastfeed				
		Yes		No		Unknown
		Number	% ^a	Number	%	Number
All Ages^b	12,958	10,238	80.0	2,557	20.0	163
10-14	5	0	ND ^c	5	ND	0
15-19	362	204	57.5	151	42.5	7
20-24	1,768	1,206	69.2	537	30.8	25
25-29	3,606	2,795	78.4	771	21.6	40
30-34	4,697	3,964	85.5	671	14.5	62
35-39	2,146	1,777	83.9	341	16.1	28
40-44	346	274	79.4	71	20.6	1
45-49	22	13	59.1	9	ND	0
50 & Over	5	4	ND	1	ND	0

^aUnknowns excluded from calculations

^bThere are 2 missing observations for age of mother

^cND = not displayed; Observations with less than 10 events are not statistically reliable so are censored



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Table 14: Resident live births by intent to breastfeed and race/ethnicity and education of mother: Allegheny County, 2017

	Total Births	Intent to Breastfeed				
		Yes		No		Unknown
		Number	% ^a	Number	%	Number
Race/Ethnicity						
White	8,824	7,206	82.8	1,499	17.2	119
Black	2,663	1,745	66.1	897	33.9	21
Asian/Pacific Islander	876	817	94.3	49	5.7	10
Multirace	342	260	77.6	75	22.4	7
Hispanic ^b	301	256	85.9	42	14.1	3
Education of Mother^c						
< High School	671	354	53.2	312	46.8	5
High School	2,456	1,520	62.9	895	37.1	41
Some college	3,022	2,250	75.4	736	24.6	36
College	3,750	3,313	89.5	389	10.5	48
Post Baccalaureate	2,992	2,766	93.3	199	6.7	27

^aUnknowns excluded from calculations

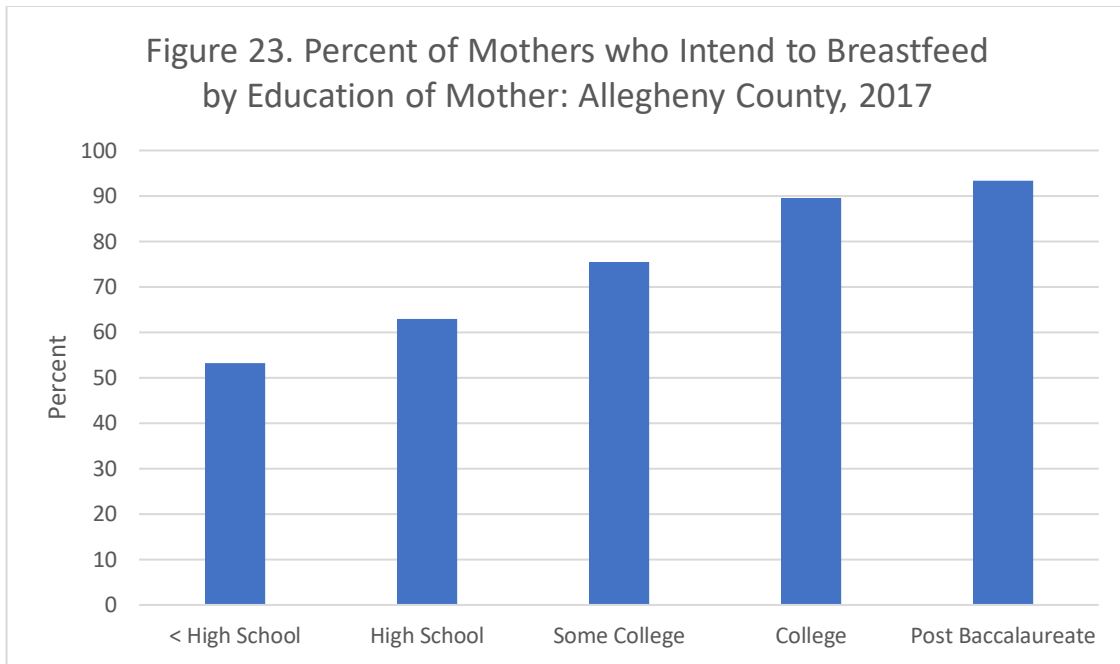
^bHispanic ethnicity includes any race

^cThere are 41 additional unknown observations for education of mother

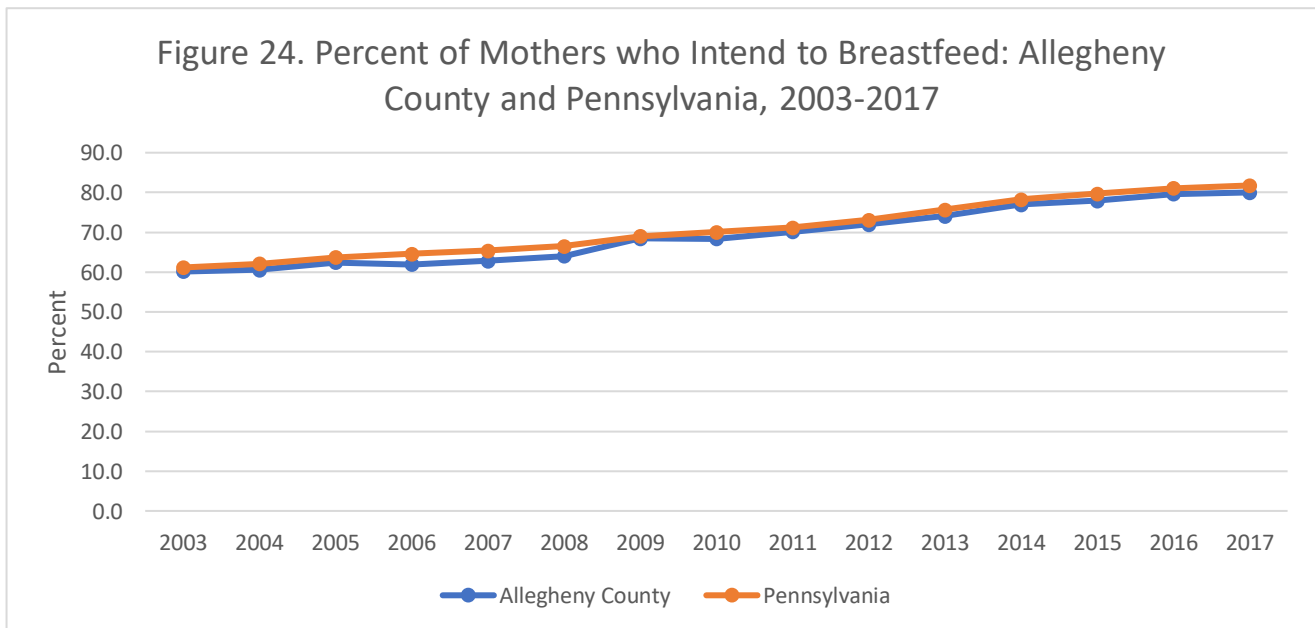


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From 2003 through 2017, the percent of mothers who intend to breastfeed has increased for both Allegheny County and Pennsylvania (APC: 2.26%). In Allegheny County, the percent of mothers with intention to breastfeed increased from 60.1% in 2003 to 80.0% in 2017. In Pennsylvania, the percent of mothers with intention to breastfeed increased from 61.2% in 2003 to 81.8% in 2017. Since 2014, the average APC has been significant at 1.54% per year. Allegheny County and Pennsylvania had similar percentages for intention to breastfeed from 2003 through 2017.

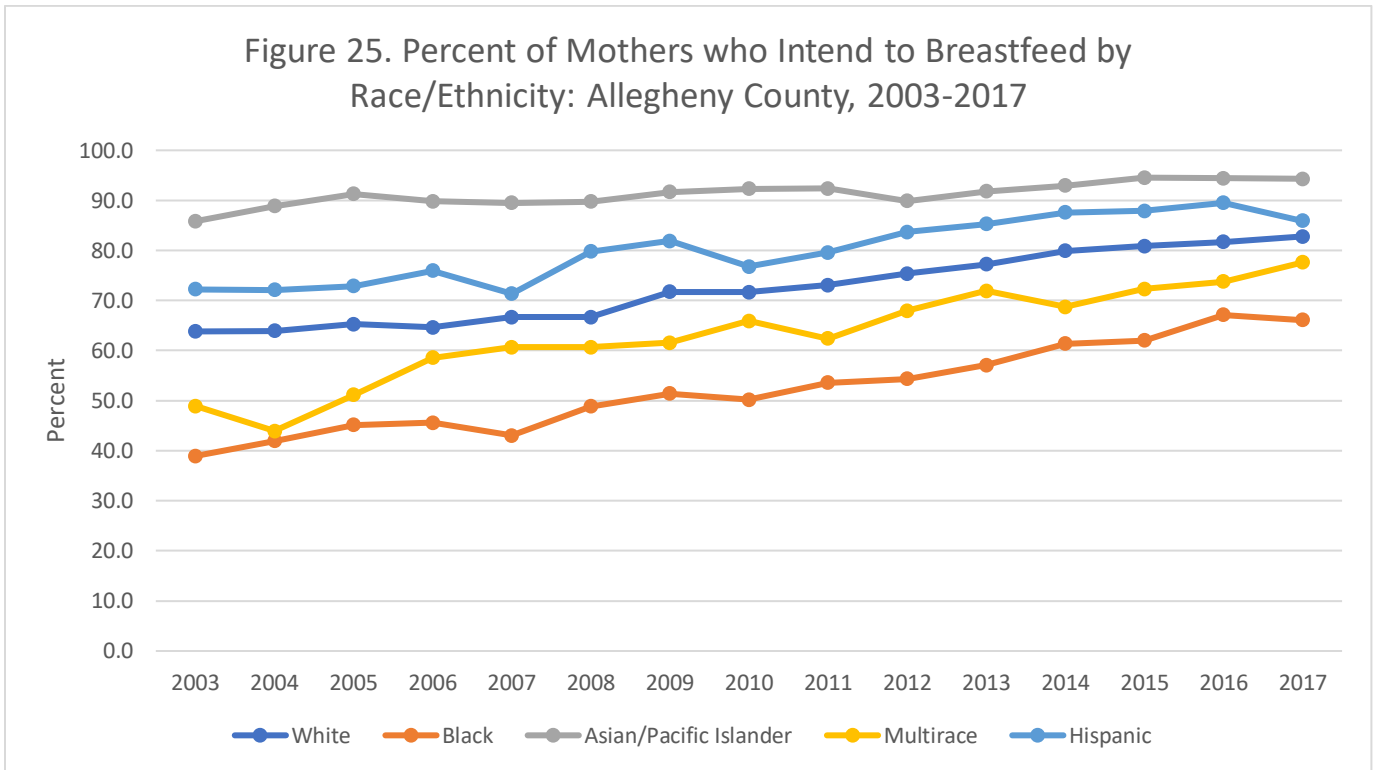




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From 2003 through 2017, mothers who identified as Asian/Pacific Islander consistently had the largest percentage of intention to breastfeed, while mothers who identified as Black consistently had the smallest percentage. The proportion of intention to breastfeed increased for all races and Hispanics from 2003 through 2017 in Allegheny County.

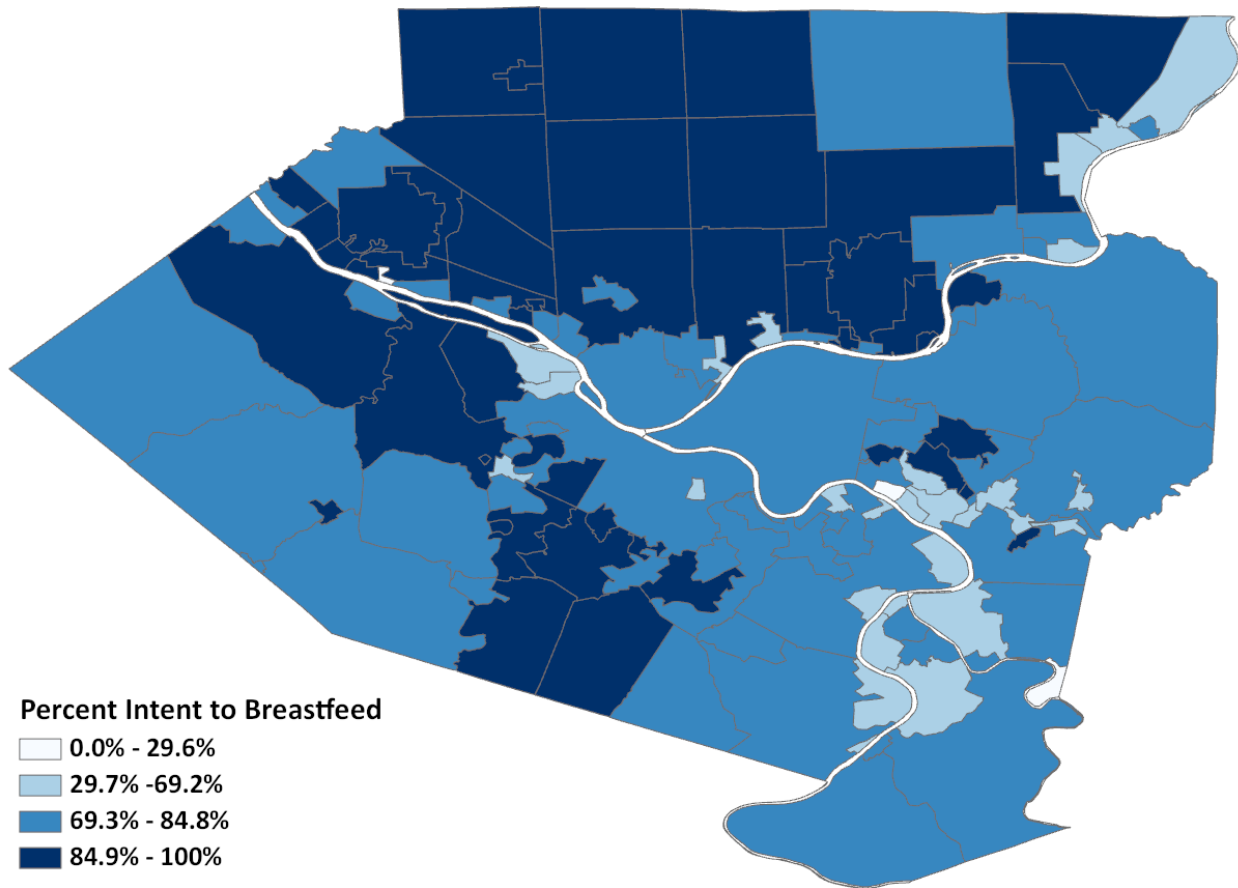




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Figure 26. Percent of mothers who intend to breastfeed by Allegheny County municipality, 2017





WIC ENROLLMENT

WIC (Women, Infants, and Children) offers nutrition counseling, breastfeeding support, and food vouchers for income-eligible and medically or nutritionally at-risk pregnant women, breastfeeding and bottle-feeding mothers, and infants and children up to 5 years of age whose family income is less than 185% of poverty. In 2017, 24.9% of Allegheny County mothers were enrolled in WIC, which is less than the 34.1% of mothers in Pennsylvania. WIC enrollment in both Allegheny County and Pennsylvania has slightly decreased from 2016. Mothers aged 15 through 19 years had the greatest percentage of WIC enrollment (70.1%), while mothers aged 35 through 39 years had the smallest percentage (12.2%). Black mothers had the highest percentage of enrollment (56.3%), while White mothers had the lowest percentage of enrollment (15.0%). The majority of WIC enrollment was among mothers with less than college education. Among mothers with less than high school education, 59.8% were enrolled in WIC. Among mothers with a post baccalaureate degree, 2.3% were enrolled in WIC.

Table 15. Resident live births to mothers enrolled in WIC by age: Allegheny County, 2017

	WIC Enrollment					
	Yes			No		Unknown
	Total Births	Number	% ^a	Number	%	Number
County, total	12,958	3,173	24.9	9,567	75.1	218
PA, total	134,585	45,884	34.1	NP ^b	NP	NP
Age of Mother						
All Ages^c						
10-14	5	4	ND ^d	1	ND	0
15-19	362	249	70.1	106	29.9	7
20-24	1,768	967	55.6	772	44.4	29
25-29	3,606	986	27.8	2,558	72.2	62
30-34	4,697	659	14.3	3,953	85.7	85
35-39	2,146	259	12.2	1,857	87.8	30
40-44	346	45	13.2	296	86.8	5
45-49	22	2	ND	20	90.9	0
50 & Over	5	2	ND	3	ND	0

^aUnknowns excluded from calculations

^bNP = Not provided information

^cThere is 1 missing observation for age of mother

^dND = not displayed; Observations with less than 10 events are not statistically reliable so are censored



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Table 16: Resident live births to mothers enrolled in WIC by race/ethnicity and education of mother: Allegheny County, 2017

	Total Births	WIC Enrollment				
		Yes		No		Unknown
		Number	% ^a	Number	%	Number
Race/Ethnicity						
White	8,824	1,306	15.0	7,388	85.0	130
Black	2,663	1,479	56.3	1,148	43.7	36
Asian/Pacific Islander	876	175	20.7	670	79.3	31
Multirace	342	131	39.3	202	60.7	9
Hispanic	301	86	29.3	208	70.7	7
Education of Mother^b						
< High School	671	395	59.8	256	40.2	10
High School	2,456	1,329	54.7	1,101	45.3	26
Some college	3,022	1,154	38.7	1,825	61.3	43
College	3,750	220	6.0	3,467	94.0	63
Post Baccalaureate	2,992	68	2.3	2,873	97.7	51

^aUnknowns excluded from calculations

^bThere are 41 additional unknown observations for education of mother

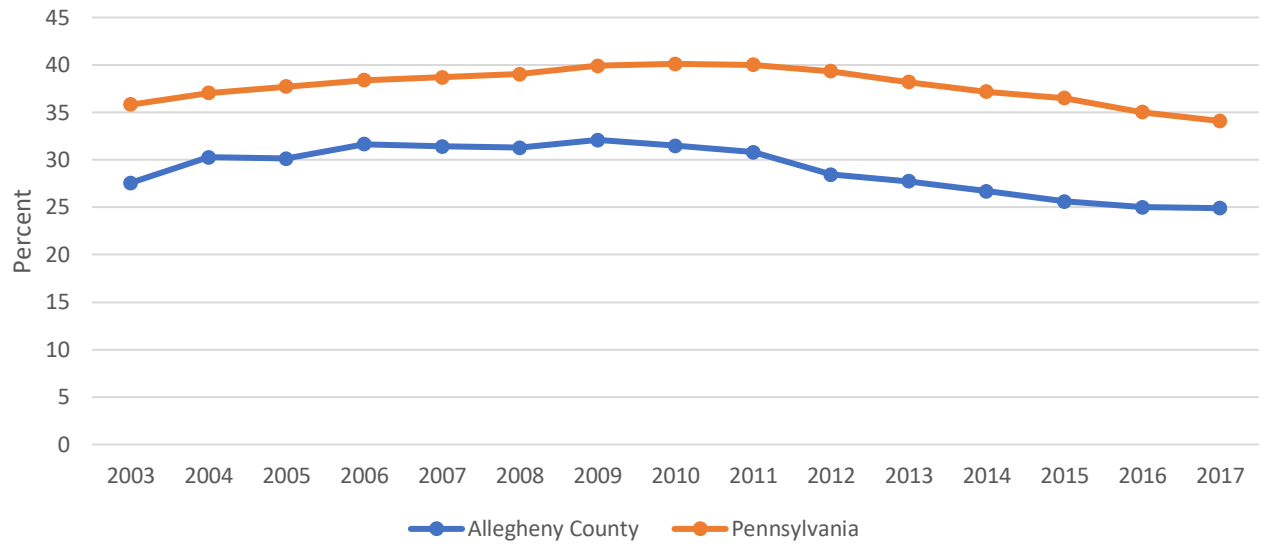
From 2003 through 2009, the percent of Allegheny County mothers enrolled in WIC increased from 27.6% to 32.1%, but has since decreased since 2009 to 2017 (24.9%) by an average of 3.61% per year. The percent of mothers enrolled in WIC for Pennsylvania increased from 35.8% in 2003 to 40.1% in 2010, and then decreased to 34.1% in 2017 by an average of 2.84% per year. The percent of mothers enrolled in WIC was consistently smaller for Allegheny County compared to Pennsylvania from 2003 through 2017.



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Figure 27. Percent Live Births to Mothers Enrolled in WIC: Allegheny County and Pennsylvania, 2003-2017





PRINCIPAL SOURCE OF PAYMENT

Out of the 12,554 resident live births with a known principal source of payment, 69.7% were to mothers with private insurance, 29.4% were to mothers with Medicaid, and 1.3% were to mothers who self-paid or had other payment options. A total of 34.2% of Pennsylvanian mothers in 2017 had Medicaid.

As the age of the mother increased, the percent of having private insurance generally increased, and the percent of having Medicaid decreased. The 35-39 age group had the highest percentage of mothers with private insurance (82.3%), while the 15-19 age group had the highest percentage of mothers with Medicaid (69.6%). This is significantly higher than the less than 20% of mothers aged 30 years and above with Medicaid. A total of 29.5% of mothers aged 15 through 19 years had private insurance. As mother’s education increased, the percent of mothers with private insurance increased while the percent of mothers with Medicaid decreased.

Table 17. Resident live births by principal source of payment and age of mother: Allegheny County, 2017

Age of Mother	Principal Source of Payment							
	Total Births	Private Insurance		Medicaid		Self-Pay and Other		Unknown
		Number	% ^a	Number	%	Number	%	
All Ages^b	12,958	8,724	69.7	3,672	29.4	158	1.3	404
10-14	5	0	ND	4	ND	1	ND	0
15-19	362	103	29.5	243	69.6	3	ND	13
20-24	1,768	671	39.2	1,022	59.6	21	1.2	54
25-29	3,606	2,251	64.1	1,213	34.5	50	1.4	92
30-34	4,697	3,697	81.4	786	17.3	57	1.3	157
35-39	2,146	1,705	82.3	343	16.6	24	1.2	74
40-44	346	273	82.0	58	17.4	2	ND	13
45-49	22	18	85.7	3	ND	0	ND	1
50 & Over	5	5	ND ^c	0	ND	0	ND	0

^aUnknowns excluded from calculations

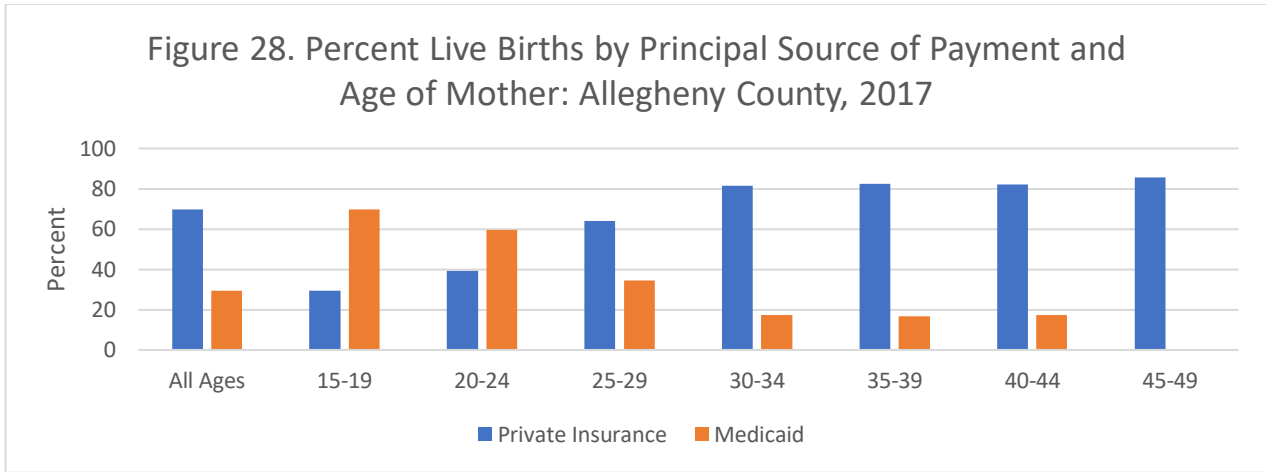
^bThere are 2 missing observations for age of mother

^cND = not displayed; Observations with less than 10 events are not statistically reliable so are censored

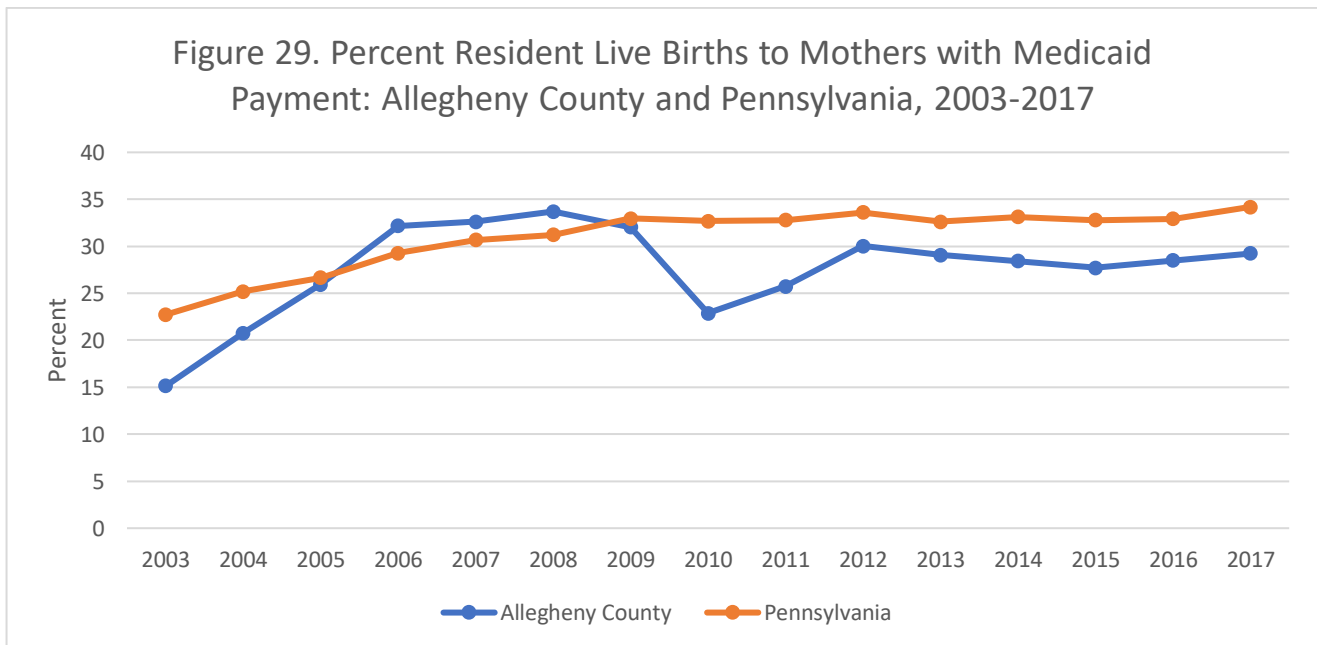


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The percent of mothers in Allegheny County with Medicaid payment decreased from 30.0% to 27.7% from 2012 through 2015 and then increased in both 2016 and 2017 (28.5% and 29.2%, respectively). It has also increased for Pennsylvania after 2015 (32.9% in 2016 and 34.2% in 2017). Since 2016, the number of mothers using Medicaid increased by 2.46%. The percent of mothers with Medicaid has been smaller for Allegheny County than all of Pennsylvania since 2010.





2017 QUARTERLY AND MONTHLY TRENDS

The rates for each birth indicator are displayed by 2017 quarters and months. Overall, the rates of each indicator remained consistent throughout the year.

Figure 30. Birth Indicators by Quarter: Allegheny County, 2017

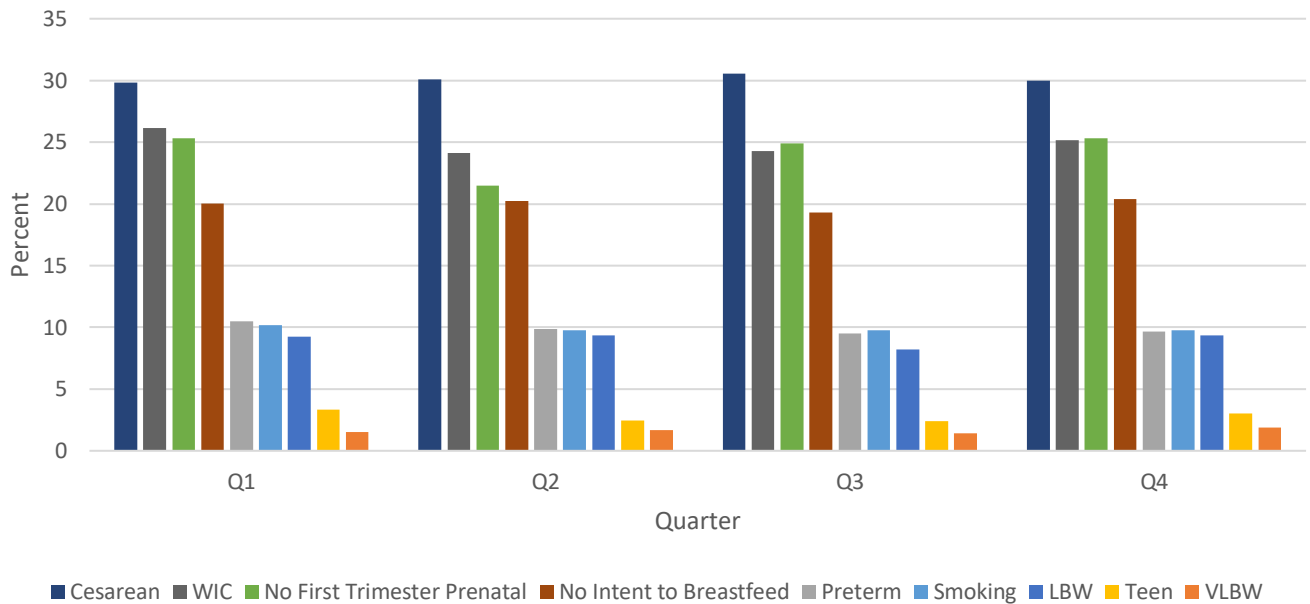
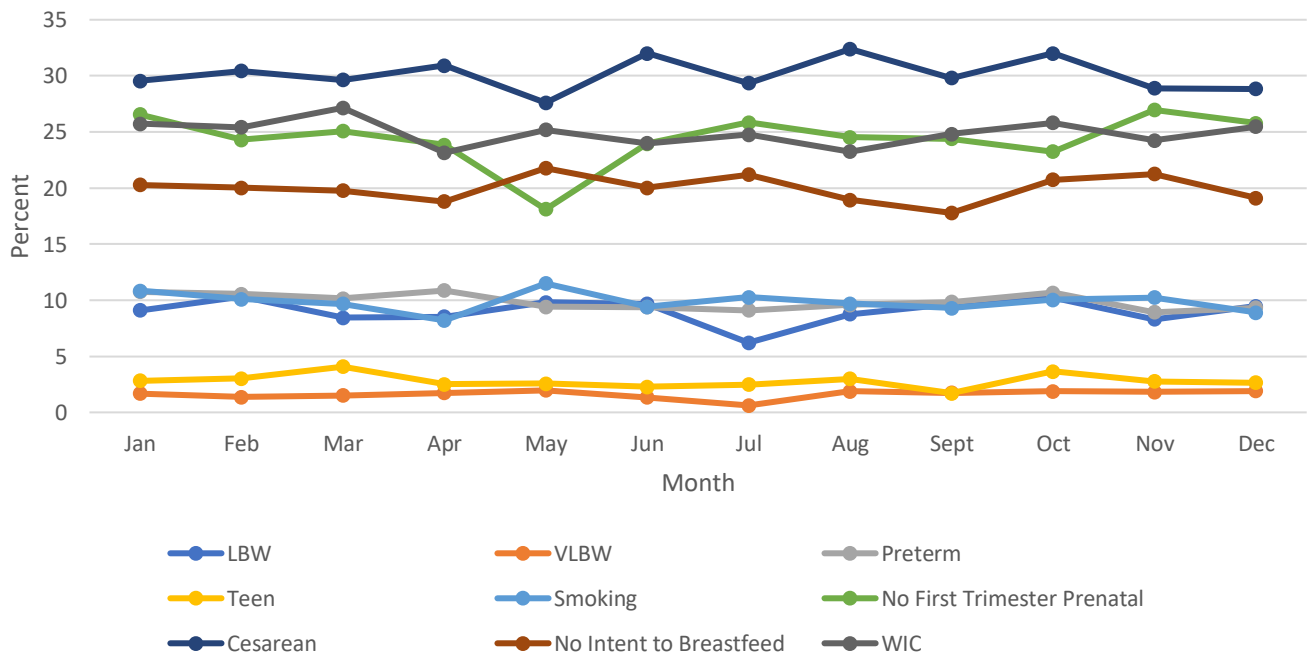


Figure 31. Birth Indicators by Month: Allegheny County, 2017





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MOST POPULAR NAMES

**Table 18. Top 20 most popular names of children by sex of child:
Allegheny County, 2017**

Sex of Child					
Male			Female		
Ranking	Name	Number	Ranking	Name	Number
1	Benjamin	67	1	Olivia	71
2	Logan	59	2	Emma	66
2	James	59	3	Ava	59
2	Michael	59	4	Charlotte	56
5	William	56	5	Amelia	53
6	Noah	55	5	Isabella	53
7	Ethan	51	7	Evelyn	46
8	Jackson	49	8	Harper	43
9	Connor	46	8	Nora	43
9	Jack	46	10	Scarlett	38
9	Mason	46	11	Ella	36
12	Liam	45	12	Grace	35
13	Owen	44	12	Madison	35
14	Lincoln	42	14	Lucy	33
15	Luca	40	14	Mia	33
16	Anthony	39	14	Sophia	33
16	Henry	39	17	Aria	32
16	Joseph	39	18	Mila	31
16	Oliver	39	18	Riley	31
17	Alexander	37	18	Violet	31



TECHNICAL NOTES

A. SOURCES OF DATA

BIRTH RECORDS

The registration of birth records is the responsibility of the Pennsylvania Department of Health. Birth record information is shared with the Allegheny County Health Department through a cooperative agreement which requires the following disclaimer: "These data were supplied by the State Health Data Center, Pennsylvania Department of health, Harrisburg, Pennsylvania. The Pennsylvania Department of Health specifically disclaims responsibility for any analyses, interpretations or conclusions."

The latest revision of the U.S. Standard Certificate of Live Birth was implemented by Pennsylvania in 2003. The following indicates which items were changed to the 2003 birth certificate that are pertinent to this 2016 Allegheny County Birth Report:

Race of the mother and the father. These race items were changed from an open-ended question to a check box format that allows multiple races to be reported. The certificate used by Pennsylvania was also revised to collect self-designated single race data. This report used the multiple race data. Birth records prior to 2003 utilized write-ins of Hispanic for race and were coded as white. Beginning in 2003, these records were coded as other.

Prenatal care visits. Beginning in 2003, exact dates of first and last prenatal visit replaced only the reported month of pregnancy in which the mother began prenatal care. Since 2003, the month prenatal care began is being calculated from the last normal menses date and the date of the first prenatal care visit.

Tobacco use. Prior to 2003, a yes/no question and average number of cigarettes smoked per day were asked. Since 2003, this item was revised to collect the average number of cigarettes smoked per day during the three months before pregnancy and by trimester (first three months, second three months, and last three months) during pregnancy.

Method of delivery. Beginning in 2003, this section was revised so that the provider reports only the final route and method of delivery. Before 2003, several questions were asked including the fetal presentation at birth, whether a delivery with forceps or vacuum extraction was attempted but unsuccessful, and whether a trial of labor was attempted.

Education. The education item was changed from the mother being asked to report the highest grade completed to having a series of check boxes to report the highest level of education completed at the time of delivery. These check boxes include degrees completed rather than years of schooling.



New data items. Other new data items include infant being breastfed, principal source of payment for delivery, and WIC food received.

POPULATION DATA

Population estimates for the state and county were provided by the Division of Health Informatics, Pennsylvania Department of Health. These data were used to compute rates, and were produced jointly by the United States Bureau of the census and the Pennsylvania State Data Center of the Pennsylvania State University at Harrisburg under the Federal-State Cooperative Program for Local Population Estimates.

B. DEFINITIONS OF TERMS

LIVE BIRTH: According to Pennsylvania law, is the expulsion or extraction from its mother of a product of conception, irrespective of the period of gestations, which shows any evidence of life at any moment after such expulsion or extraction.

BIRTHWEIGHT: The first weight of the fetus or newborn after birth.

VERY LOW BIRTHWEIGHT: Birthweight is under 1,500 grams.

LOW BIRTHWEIGHT: Birthweight is under 2,500 grams.

NORMAL BIRTHWEIGHT: Birthweight is greater than 2,499 and less than 4,000 grams.

HIGH BIRTHWEIGHT: Birthweight is 4,000 grams or greater.

PRETERM: A birth that occurred at less than 37 completed weeks of obstetric gestation.

FULL TERM: A birth that occurred at over 36 weeks obstetric gestation.

MEDIAN AGE: The age that falls exactly in the middle of the entire range of ages ranked in order from low to high such that 50% of the ages fall above it and 50% fall below it.

RACE: All data in this report are based on the race of the mother, as recommended by the National Center for Health Statistics.

ASIAN/Pacific Islander: Mothers and fathers were considered Asian/Pacific Islander if she or he identified as any combination of Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, Other Asian or as any combination of Native Hawaiian, Guamanian or Chamorro, Samoan, or Other Pacific Islander.

MULTIRACE: Mothers and fathers were considered multirace if she or he identified as any combination of White, Black or African American, American Indian and Alaskan Native, Chinese, Filipino, Japanese, Korean, Vietnamese, Other Asian, Native Hawaiian, Guamanian or Chamorro, Samoan, or Other Pacific Islander that would not have her or him fall into another race category.

HISPANIC: Mothers and fathers were considered Hispanic if she or he identified as Mexican, Mexican American, Chicana, Puerto Rican, Cuban, or Other Hispanic.



SMOKING: Smoking status was defined as cigarette use. A mother was considered as having smoked if she smoked at least one cigarette during any trimester of her pregnancy.

SMOKING CESSATION: Smoking cessation occurred when the mother reported smoking at least one cigarette in the three months prior to pregnancy to reporting smoking zero cigarettes during the length of her pregnancy.

C. RATES

Rates are used to make comparisons between different groups, locations, or times. Rates are calculated by converting the absolute number of events to a relative number. This conversion is made by relating the actual count of events to the population at risk in a particular area at a specific time. All rates defined in this report are computed for a one-year period.

FORMULAS

$$\text{Crude Birth Rate} = \frac{\text{Number of Resident Live Births}}{\text{Total Resident Population}} \times 1,000$$

$$\text{General Fertility Rate} = \frac{\text{Number of Resident Live Births}}{\text{Total Female Resident Population Aged 15-44 Years}} \times 1,000$$

$$\text{Age-Specific Birth Rate} = \frac{\text{Number of Resident Live Births to Mothers in a Specific Age Group}}{\text{Total Female Population in Specific Age Group}} \times 1,000$$