

		Healthy People 2030 Objective	Year	California	Alameda County (count)	Alameda County Rates by Race/Ethnicity of Mom/Person Giving Birth							
						African American/ Black	American Indian Alaska Native	Asian	Pacific Islander	Hispanic/ Latina/o/x/e	White	Multiracial	
	1	Total Population	NA	2022	39,149,809	1,706,734	158,423	4,789	565,129	13,358	396,496	467,417	90,456
Births	2	Number of Live Births	NA	2022	419,214	16,598	1,335	24	5,781	132	4,747	3,705	499
	3	Birth Rate (per 1,000 population)	NA	2022	10.7/1000	9.7/1000	8.4	5.0	10.2	9.9	12.0	7.9	5.5
	4	Fertility Rate (per 1,000 females 15-44 yrs)	NA	2020-2022	51.3/1000	48.2/1000	43.3	23.5	49.1	50.1	51.6	45.8	30.4
	5	Teen Birth Rate (per 1,000 females ages 15-19 years)	31.4 or fewer	2020-2022	9.8/1000	6.0/1000 (310 per yr)	9.0	13.6*	0.4	9.2	14.4	1.6	2.0
	6	Singleton Low Birth Weight Births (%)	9.4% or less	2020-2022	7.4% ⁱ	6.1% (1,011 per yr)	10.2	7.8*	7.0	6.6	5.2	4.3	5.8
	7	Singleton Very Low Birth Weight Births (%)	1.4% or less ^j	2020-2022	1.1% ⁱⁱ	0.8% (132 per yr)	1.6	—	0.7	—	0.9	0.5	0.9
	8	Singleton Preterm Births (%)	9.4% or less	2020-2022	9.1% ⁱⁱ	7.2% (1,190 per yr)	9.4	16.9*	7.3	10.1	7.6	5.7	6.5
	9	Singleton Very Preterm Births (%)	1.5% or less ^j	2020-2022	2.3% ⁱⁱⁱ	1.0% (160 per yr)	1.6	—	0.8	—	1.1	0.7	—
	10	Medi-Cal Births (%)	NA	2020-2022	40.1% ⁱⁱⁱ	20.7% (3,503 per yr)	39.9	37.1	6.5	26.3	41.2	11.3	14.5
	11	Births to First-Time Mothers (%)	NA	2022	39.7%	45.7% (7,575)	42.5	50.0*	51.0	35.6	38.0	47.5	50.3
	12	Births to non US-Born Mothers (%)	NA	2022	32.7%	48.9% (8,087)	20.2	—	75.5	26.5	51.5	25.5	8.4
	Deaths	13	Infant Death Rate (per 1,000 live births)	5.0 or fewer	2019-2021	4.1/1000	3.4/1000 (60 per yr)	8.9	5.5*	2.6	7.6*	2.8	2.7
14		Fetal Death Rate (per 1,000 births + Fetal Deaths)	5.7 or fewer	2018-2020	5.3/1000	4.5/1000 (80 per yr)	8.1	6.1*	3.3	8.0*	4.7	3.8	4.4*
15		SIDS/SUIDS Death Rate (per 100,000 live births)	500 or fewer	2019-2021	50.7/100,000	43.9/100,000 (8 per yr)	167.7*	—	19.4*	—	43.3*	49.4*	101.3*
Pregnancy & Delivery	16	First Trimester Entry into Prenatal Care (%)	80.5% or more	2022	86.3%	89.3% (14,115)	83.5	83.3	94.0	75.6	84.7	91.1	88.2
	17	Adequate/Adequate Plus Prenatal Care	80.5% or more	2022	73.4%	62.7% (10,403)	61.8	58.3	65.6	49.2	61.0	61.2	58.9
	18	Any Diabetes at Delivery (per 100 deliveries)	NA	2021-2023	13.2%	16.9% (2,726 per yr)	12.9	16.8	22.2	26.6	16.5	9.3	13.7
	19	Any Hypertension at Delivery (per 100 deliveries)	NA	2021-2023	17.2%	19.2% (3,097 per yr)	30.3	17.6	14.6	26.0	20.0	20.8	23.1
	20	Severe Maternal Morbidity (per 10,000 deliveries)	61.8/10,000	2021-2023	110.4/10,000	136.5/10,000 (220/yr)	224.1	103.9*	103.0	215.7	152.3	120.4	139.9
	21	Low Risk C-Section (per 100 live births)	23.6% or less	2020-2022	24.6%	23.7% (1,624 per yr)	27.6	—	25.1	24.3	20.5	23.9	22.2
Nutrition & Weight	22	Women Infants and Children (WIC) Recipients (%)	NA	2022	42.2%	23.9% (3,936)	41.0	48.7*	7.3	27.9	50.5	11.3	15.5
	23	Received CalFresh (food stamps) during pregnancy	NA	2019-2021	18.9%	12.5%	34.0	32.9*	5.2 [#]	—	19.6	8.4	—
	24	Food Insecurity During Pregnancy	6.0% or less	2019-2021	19.4%	15.5%	34.4	34.6*	9.4 [#]	—	29.9	9.8*	—
	25	Healthy Weight Before Pregnancy	47.1% or more	2020-2022	43.2%	48.5% (7,242 per yr)	34.1	30.9	62.5	15.4	30.4	53.9	45.1
	26	Excessive Weight Gain During Pregnancy (%)	NA	2020-2022	43.7%	39.0% (5,609 per yr)	50.1	50.0	30.3	60.3	43.3	41.5	46.9
Mental Health & Stress	27	Prenatal Depressive Symptoms	NA	2019-2021	14.7%	15.3%	29.3	11.4*	15.8 [#]	—	14.0	11.0	—
	28	Postpartum Depressive Symptoms	NA	2019-2021	13.5%	12.0%	15.2	24.6*	12.1 [#]	—	13.6	8.6	—
	29	Often Experienced Racism Over Lifetime	NA	2019-2021	11.7%	16.6%	53.7	—	12.2 [#]	—	20.2	4.2 ⁺	—
Family Plan- ning	30	Post Partum Birth Control Use (%)	65.1% or more	2019-2021	79.2%	71.7%	71.1	71.9*	60.8 [#]	—	85.5	75.7	—
	31	Unintended Pregnancies (%)	36.5% or less	2016-2018	39.7%	35.1%	59.1	—	23.0 [#]	—	50.8	26.6 ⁺	—
	32	Short Interpregnancy (<18 months) Interval (%)	26.9% or less	2020-2022	26.5%	22.4%	23.4	33.3	19.3	39.1	19.4	28.5	27.7
Infants	33	Exclusively Breastfed Newborn in Hospital (%)	NA	2020-2022	69.2%	78.3%	71.0	85.7	79.2	55.1	74.3	84.7	79.8
	34	Exclusive Breastfeeding Infant 3 months (%)	42.4% or more	2019-2021	32.0%	36.8%	33.9	21.2*	42.1 [#]	—	29.9	42.2	—
	35	Any Breastfeeding Infant 3 months (%)	NA	2019-2021	70.8%	83.7%	70.8	66.0*	91.2 [#]	—	77.0	85.8	—
	36	Placed Infant on Back to Sleep (%)	88.9% or more	2019-2021	86.0%	88.9%	79.5	90.9*	89.0 [#]	—	89.5	91.5	—
	37	Infant Always/Often Shared Bed (%)	NA	2019-2021	28.9%	28.6%	47.4	41.4*	26.4 [#]	—	33.0	16.7	—
Women & Young Children	38	Women ages 15-44 years Living in Poverty (%)	8.0% or less	2017-2021	14.0%	10.7%	19.4	24.5	8.2	15.0	12.4	8.6	11.3
	39	Birthing Women with Less Than a High School Education (%)	9.3% or less	2019-2021	14.8%	6.8%	7.6	19.3	11.4	14.7	26.5	3.4	10.8
	40	Uninsured Women Pre-pregnancy (%)	8.6% or less	2019-2021	10.1%	7.2%	8.6*	5.0*	4.6 [#]	—	13.9	4.2	—
	41	Women on Medi-Cal, Pre-pregnancy (%)	NA	2019-2021	36.1%	23.3%	46.1	51.1*	14.6 [#]	—	38.0	11.8	—
	42	Women Reporting No Postpartum Medical Visit (%)	NA	2019-2021	11.7%	10.7%	16.0	21.7*	8.2 [#]	—	13.8	10.2	—
	43	Children Under 0-17 Years Living in Poverty (%)	NA	2018-2022	15.6%	9.4%	23.3	9.8	4.5	18.6	13.7	5.1	7.9
	44	Infants on Public Insurance (%)	NA	2019-2021	48.3%	30.9%	61.0	59.8*	17.6 [#]	—	54.5	16.1	—

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See page 2. for MPCAH indicator definitions and data sources.

Race/Ethnicity Descriptions for Birth and Death data. Note: refer to other data sources for their race/ethnicity definitions.

Black/African Americans are babies born to Black non-Hispanic mothers.

American Indians are babies born to American Indian, Eskimo, or Aleut non-Hispanic mothers.

Asians are babies born to Asian non-Hispanic Mothers.

Pacific Islanders are babies born to Hawaiian, Guamanian, Samoan, or other Pacific Islander non-Hispanic mothers.

Hispanic/Latina/o/x/e/s are babies born to Hispanic/Latina/o/x/e mothers of any race with Mexican, Chicano, Puerto Rican, Cuban, Central/South American, or other Spanish/Hispanic ethnicity.

Whites are babies born to White non-Hispanic mothers.

Multiracial babies are born to non-Hispanic mothers of more than one race.

Interpretation

Count: A count or frequency is the actual number of events or cases at a given point in time. Counts are used to look at the magnitude of the health event within a population.

Rate: A rate is a measure of a health event in a specific population over a set time period. For example, the Alameda County (AC) birth rate is the number of live births over the total AC population per 1,000 residents or 10.7 per 1,000 residents. Rates are used to compare populations of different sizes or over different time periods, for example comparing different races/ethnicities or ages.

Percentage: A percentage or prevalence is a proportion of total events over the total population that can be affected at a given point in time. Percentages are used to compare populations of different sizes for example comparing different Statistics highlighted in **red** are those race/ethnic groups that have the most inequitable measures/outcomes.

Alameda County is missing race/ethnicity data for 2.3% of all births in 2022.

Technical Notes

— Rates not displayed because of low incidence (counts below 11 are excluded), not available, or not applicable.

* California rate is displayed because of low incidence or data not available at the Alameda County level.

Category includes Asians, Native Hawaiians and other Pacific Islanders (API) combined.

i. Healthy People 2020 Objective.

ii. California rate is overestimated because it includes singleton and multiple births.

iii. California rate is from birth certificate rather than hospital discharge data, therefore it may be underestimated.

Definitions

Birth Rate (BR): Number of total births per 1,000 population.

Fertility Rate: Number of births to mothers 14-44 years per 1,000 population females 15-44 years of age.

Teen Birth Rate (TBR): Number of births to 15-19 year old mothers per 1,000 population females 15-19 years of age.

Singleton Low Birth Weight Births: Number births <2,500g/number live births. We focus on singleton births because multiple births (twins, triplets) are often premature and low birth weight.

Singleton Very Low Birth Weight Births: Number births <1,500g/number live births. We focus on singleton births because multiple births (twins, triplets) are often premature and low birth weight.

Singleton Preterm Births: Number births <37 weeks gestation/ number live births. We focus on singleton births because multiple births (twins, triplets) are often premature and low birth weight.

Singleton Very Preterm Births: Number births <32 weeks gestation/ number live births. We focus on singleton births because multiple births (twins, triplets) are often premature and low birth weight.

Medi-Cal Births: Births where Medi-Cal was indicated as payer source for delivery.

Births to First-Time Mothers: Births to women with no previous children.

Births to non US born Mothers: Births to women not born in the US. Birth Certificate data does not include the number of years the mother has been living in the United States.

Infant Death Rate (IMR): Number of deaths of children <1 year of age per 1,000 live births.

Fetal Death Rate: Number of fetal deaths at 20 or more weeks gestation per 1,000 live births + fetal deaths.

SIDS/SUIDS Death Rate: Number of deaths from Sudden Unexplained or Infant Death Syndrome per 1,000 births (ICD-10 Mortality Codes: W75, R95, R99)

First Trimester Entry into Prenatal Care: Pregnant women who began prenatal care within the first three months of their pregnancy.

Adequate/Adequate Plus Prenatal Care Utilization Index (APNCU), also known as the Kotelchuck Index, uses two crucial elements obtained from birth certificate data-when prenatal care began (initiation) and the number of prenatal visits from prenatal care initiation until delivery. APNCU is a ratio of observed to expected visits and is considered adequate when it is 80% or greater. The Kotelchuck Index does not measure the quality of prenatal care.

Any Diabetes at Delivery: Diabetes diagnoses during pregnancy or delivery per 1,000 live birth deliveries.

Any Hypertension at Delivery: Hypertension diagnoses during pregnancy or delivery per 1,000 live birth deliveries.

Severe Maternal Morbidity (SMM): Number of unexpected and potentially life-threatening complications from labor and delivery that result in significant short- or long-term health consequences. SMM includes 20 indicators that represent either serious complications of pregnancy or delivery, like sepsis or acute renal failure, or procedures used to manage serious conditions, such as ventilation or hysterectomy. The SMM rate is the number of conditions/complications per 10,000 live birth deliveries.

Low Risk C-section: Percentage Primary C-section during full-term (not premature) singleton delivery.

Women Infants and Children (WIC) Recipients: Percentage births where the mother participated in the Women Infants and Children (WIC) program

Received CalFresh: Percentage of MIHA survey respondents who received Food stamps or California Supplemental Nutrition Assistance Program (SNAP) during pregnancy.

Food Insecurity: Percentage of MIHA survey respondents who reported experiencing food insecurity during pregnancy.

Healthy Weight pre-pregnancy: Percent of women who were not overweight or obese based on BMI from reported pre-pregnancy weight

Excessive Weight Gain During Pregnancy: Percentage of mothers who gained weight above recommended amount during their pregnancy. Weight gain during pregnancy is the difference between an individual's weight at delivery and prepregnancy weight.

Excessive weight gain during pregnancy is based on the National Academy of Medicine, previously the Institute of Medicine (IOM), guidelines for recommended weight gain during pregnancy (limited to full-term, singleton births) that are specific to an individual's prepregnancy Body Mass Index (BMI).

Prenatal Depressive Symptoms: Percentage of MIHA survey respondents who always or often felt down, depressed hopeless or had little interest or pleasure in doing things usually enjoyed during their pregnancy.

Postpartum Depressive Symptoms: Percentage of MIHA survey respondents who always or often felt down, depressed hopeless or had little interest or pleasure in doing things usually enjoyed during in the postpartum period.

Often Experienced Racism Over Lifetime: Percentage of MIHA survey respondents who reported often/always to the following statement, overall during your life until now, have you been discriminated against, prevented from doing something, or harassed or

Post Partum Birth Control Use: Percentage of MIHA survey respondents who indicated that the woman or husband/partner was doing something at the time of the survey to keep from getting pregnant.

Unintended Pregnancies: Percentage of MIHA survey respondents who indicated that their pregnancy is a pregnancy that was either mistimed or unwanted. Mistimed pregnancy occurs when a woman did not want to become pregnant at the time the pregnancy occurred, but does want to become pregnant at some point in the future. Unwanted pregnancy occurs when woman did not want to become pregnant then or at any time in the future.

Short Interpregnancy Interval: Percentage of mothers giving birth to a child less than 18 months after giving birth to previous child.

Exclusively Breastfed Newborn in Hospital: Pregnant women who exclusively breastfed newborn in hospital after birth.

Exclusive Breastfeeding Infant 3 months: Percentage of MIHA survey respondents who reported they fed their infant only breast milk (no supplementation with formula, other liquids or food) for at least three months after delivery.

Any Breastfeeding Infant 3 months: Percentage of MIHA survey respondents who reported they fed their infant breast milk for at least three months after delivery with or without supplementing with formula.

Placed Infant on Back to Sleep: Percentage of MIHA survey respondents who reported they put their baby down to sleep on his or her back most of the time.

Infant Always/Often Shared Bed: Percentage of MIHA survey respondents who reported their infant always or often slept in the same bed with mother or someone else.

Women ages 15 -44 years living in poverty: Percentage of females between 15 and 44 years of age living at or below 100% poverty level for whom poverty status can be determined.

Women Ages 18-44 Years with Less Than a High School Education: Percentage of females 18 to 44 years of age whose highest level of education was less than high school diploma or GED for whom educational attainment could be determined.

Uninsured Women Ages 15 years or older: Percentage of females 15 years or older of age who had no health insurance coverage in the previous 12 months for whom health insurance status could be determined.

Women on Public Insurance 15 years or older pre-pregnancy: Percentage of females ages 15 years or older who have insurance through Medi-Cal

Women Reporting No Postpartum Visit: Percentage females who did not have a medical visit after giving birth.

Children 0-17 years living in poverty: Percentage of children 0-17 years of age living at or below 100% poverty level for whom poverty status can be determined.

Infants on Public Insurance: Percentage of infants who have insurance covered through Medi-Cal.

Data Sources

U.S. Census Bureau, American Community Surveyr California Populations and ACPHD CAPE, derived from ESRI demographic data for Alaameda County Populations. (1)(38)

Alameda County Vital Statistics Files: Births, Fetal Deaths, and Deaths (2)(3)(4)(5)(6)(7)(8)(9)(10)(11)(12)(13)(14)(15)(16)(17)(22)

California Department of Public Health. Maternal and Child Health State and County Dashboards. (21)(25)(26)(32)(33)(34)(35)(43)

Maternal and Infant Health Assessment (MIHA) Alameda County and California Dashboards. (23)(24) (27)(28)(29)(30)(31)(36)(37)(39)(40)(41)(42)(44)

Data Prepared by: California Department of Public Health, Maternal, Child and Adolescent Health Division, Epidemiology, Surveillance and Federal Reporting Section. (18)(19)(20)

Healthy People 2030 Objectives were obtained from the Healthy People 2030 website