Bronx Community Health Dashboard: Maternal and Child Health

Last Updated: 1/31/2018

See last slide for more information about this project.
Disability due to low birth weight and short gestation (DALYs per 100,000)


Infant mortality rate in the U.S. is higher than the average for other higher-income countries

Similar to national rates, the fertility rate* in the Bronx has declined modestly by 6%.

In the Bronx, 25-29 year olds have the highest birth rate.

*The fertility rate is the number of births over the number of women 15-44 years of age.

Teen (age 15-19y) birth rate
Bronx has the highest teen birth rate in New York City

Teen birth rate in Bronx has declined by 50% since 2003, but is still 75% higher than the rest of NYC.

Teen birth rates have declined in all racial/ethnic groups but the disparities remain constant

In the Bronx, Morrisania has the highest teen birth rate

Timely initiation of prenatal care

Defined as starting prenatal care in 1<sup>st</sup>, 2<sup>nd</sup> or 3<sup>rd</sup> month of pregnancy
In the Bronx, 9.3% of women do not get prenatal care until the 3rd trimester if not at all, compared to 5.5% in the rest of NYC and 5.9% nationally.

Bronx has a much lower percent of mothers getting their first prenatal care visit in the first trimester of pregnancy than other NYC boroughs.

The proportion of women starting prenatal care in the first trimester has increased, though the disparity has between the Bronx and rest of NYC has marginally worsened.

Teen women, non-Hispanic black women and those with less education are least likely to start prenatal care in the first trimester.

Racial/ethnic disparities in the early initiation of prenatal care in the Bronx have largely persisted

In the rest of NYC, the percent of teen mother’s starting prenatal care in the first trimester has increased by 13% as compared to 6% in the Bronx.

Low birth weight

Defined as <2,500 grams

Data are limited to single births because there is evidence that multiple births are more likely to result in low birth weight.

Percent of total births with low birth weight has decreased by 10% in the Bronx

Data limited to single births.
In the Bronx, non-Hispanic blacks have the highest percent of total births with low birth weight.

Data limited to single births.
Teens (and older women) are more likely to have a low birth weight infant as are women with less education.

Preterm delivery

Defined as <37 weeks

Data are limited to single births because there is evidence that multiple pregnancies greatly increase the risk for preterm delivery.

Percent of total births delivered preterm has declined by 9% in the Bronx

Data limited to single births.
In the Bronx, non-Hispanic blacks have the highest percent of preterm births

Data source: CDC Wonder Births Data, 2015.
Data limited to single births.
Teens (and older women), as well as those with less education tend to have a higher preterm birth percentage

Data source: CDC Wonder Births Data, 2015.
Data limited to single births.
Infant mortality rate
Bronx has the highest burden of infant mortality, of which the leading cause is disorders related to preterm and low birth weight, followed by congenital problems.
Infant mortality rate in the Bronx has declined by 33%, but remains higher than the infant mortality rate in the rest of NYC.

In the Bronx, mothers younger than 20 years old, non-Hispanic black, and without a high school diploma have the highest infant mortality rates.

In the Bronx, infant mortality rate has declined by 40% among non-Hispanic blacks and disparities have modestly declined but do remain

In the Bronx, twins have an increased risk of infant mortality, as do very low birth weight and very preterm infants.

In the Bronx, Pelham Parkway has the highest infant mortality rate

3-Year Average Infant Mortality Rate per 1,000 Births

Bronx has the second highest infant mortality rate among teen mothers.


* Interpret with caution due to small numbers.
Maternal mortality rate from pregnancy or delivery complications
Maternal mortality rate from pregnancy or delivery complications has increased by 12% in the Bronx, but decreased by 31% in the rest of NYC.

Data sources: CDC Wonder Underlying Cause of Death Data and Births Data, 2007-2015.
In the Bronx, 35+ year olds and non-Hispanic blacks have the highest mortality rates from pregnancy or delivery complications.

Maternal mortality rate per 100,000 live births from pregnancy or delivery complications:

- <25: 18.0
- 25-34: 35.7
- 35+: 70.1
- Hispanic: 33.7
- NHB: 60.7

Data sources: CDC Wonder Underlying Cause of Death Data and Births Data, 2007-2015.

# of deaths for non-Hispanic whites are not statistically reliable.
Pre-pregnancy BMI
The Bronx has the highest percent of women who are obese prior to pregnancy and this percentage has increased since 2008.

Diabetes during pregnancy
In both the Bronx and the rest of NYC the prevalence of diabetes during pregnancy has increased substantially.

Diabetes during pregnancy is most common among older moms and those with less education.

Chronic hypertension
Chronic hypertension during pregnancy is 2.5-times higher among women in the Bronx as compared to the rest of NYC.

Among Bronx women, chronic hypertension during pregnancy is much more common among non-Hispanic black women and older women.

Intent to exclusively breastfeed
The Bronx has the lowest percentage of women saying they plan to breastfeed exclusively & the disparity with the rest of NYC has widened.

About the Community Health Dashboard Project

- The goal of the project is to provide Bronx-specific data on risk factors and health outcomes with an emphasis on presenting data on trends, socio-demographic differences (e.g., by age, sex, race/ethnicity, etc.) and sub-county/neighborhood level data.

- Data will be periodically updated as new data becomes available.

- Produced by Montefiore’s Office of Community & Population Health using publicly-available data sources.

- For more information please contact Colin Rehm, PhD, Manager of Research & Evaluation (crehm@montefiore.org).