



Right Start in Michigan' Largest Cities—2003: 35-City Overview

Summary

Between 1990 and 2001 the number of births in Michigan's largest cities (populations over 25,000) declined almost twice as much as in the rest of the state (21% vs 12%). The large-city share of Michigan newborns dropped from 45 to 40 percent by 2001.

In most of Michigan's largest cities, births numbered between 500 and 1,000. Among these large cities the number of births varied considerably with births in Detroit (16,000) four times the number in Grand Rapids, which had the second largest number. Of all births in the 35-cities, Detroit represented over a quarter (29%) and Grand Rapids less than a tenth (7%).

The cities of Battle Creek and Lansing comprised almost two of every three county births. In contrast, only 2 percent of Wayne County births were to mothers in the cities of Lincoln Park and Dearborn Heights.

City babies were at much higher risk on most maternal and infant indicators, especially nonmarital births, low education levels, and teen births. The only measure where non-urban infants in Michigan experienced less risk was in the lower percentage of their mothers who smoked during pregnancy.

City Share of Births in Michigan Counties (2001)

County	Cities	Number	Percent of county births
Michigan		133,231	100.0
	Total city births	53,553	40.2
Bay	Bay City	634	47.1
Calhoun	Battle Creek	1,227	64.5
Genesee	Flint	2,650	41.9
Ingham	East Lansing	409	8.2
Ingham	Lansing	2,342	63.3
Jackson	Jackson	905	44.7
Kalamazoo	Kalamazoo	1,442	45.5
Kalamazoo	Portage	576	18.2
Kent	Grand Rapids	3,960	42.6
Kent	Kentwood	777	8.3
Kent	Wyoming	1,176	12.6
Macomb	Eastpointe	303	4.0
Macomb	Roseville	640	6.3
Macomb	St. Clair Shores	927	6.1
Macomb	Sterling Heights	1,516	15.0
Macomb	Warren	1,736	17.2
Midland	Midland	508	48.9
Muskegon	Muskegon	931	38.3
Oakland	Farmington Hills	944	5.9
Oakland	Novi	535	3.4
Oakland	Pontiac	1,334	8.4
Oakland	Rochester Hills	773	4.9
Oakland	Royal Oak	795	5.0
Oakland	Southfield	614	5.8
Oakland	Troy	939	5.9
Ottawa	Holland	655	18.0
Saginaw	Saginaw	1,251	45.2
Washtenaw	Ann Arbor	1,355	32.3
Wayne	Dearborn	1,977	6.5
Wayne	Dearborn Heights	722	2.4
Wayne	Detroit	15,311	50.1
Wayne	Lincoln Park	547	1.8
Wayne	Livonia	1,023	3.3
Wayne	Taylor	941	3.1
Wayne	Westland	1,178	3.9

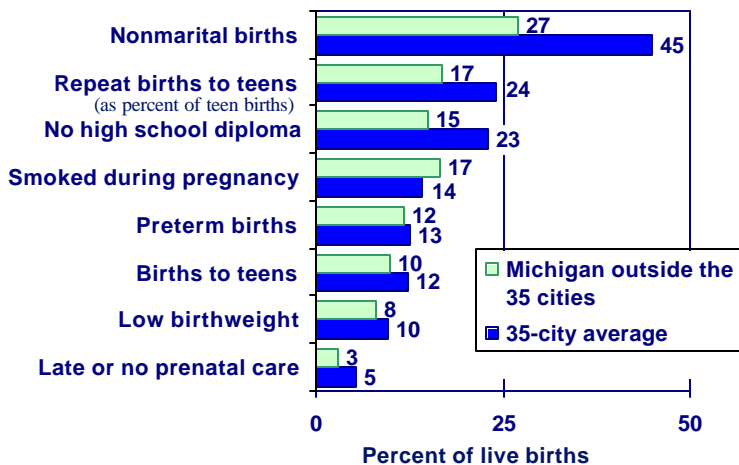
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- Michigan League for Human Services
- Michigan's Children.

Source: *Vital Records and Health Data Development Section, Michigan Department of Community Health*

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Mothers and infants in Michigan's largest cities experience higher risk on most measures than those outside these cities.



Source: *Vital Records and Health Data Development Section, Michigan Department of Community Health - 2001 data*



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Right Start 2003: Michigan

Right Start Measure (percent of live births)	Michigan	U.S. Average	MI Rank
Births to teens	10.5	11.8	20
No high school education	17.7	21.7	25
Preterm births	11.6	11.6	27
Unmarried women	33.3	33.2	29
Late or no prenatal care	3.7	3.9	29
Repeat births to teens*	21.0	21.1	32
Smoked during pregnancy	15.8	12.2	32
Low birthweight	7.9	7.6	33

* percent of teen births
 Source: Right Start 2003 - KIDS COUNT

➤ **On all but three of eight *Right Start* measures Michigan reflected national averages.**

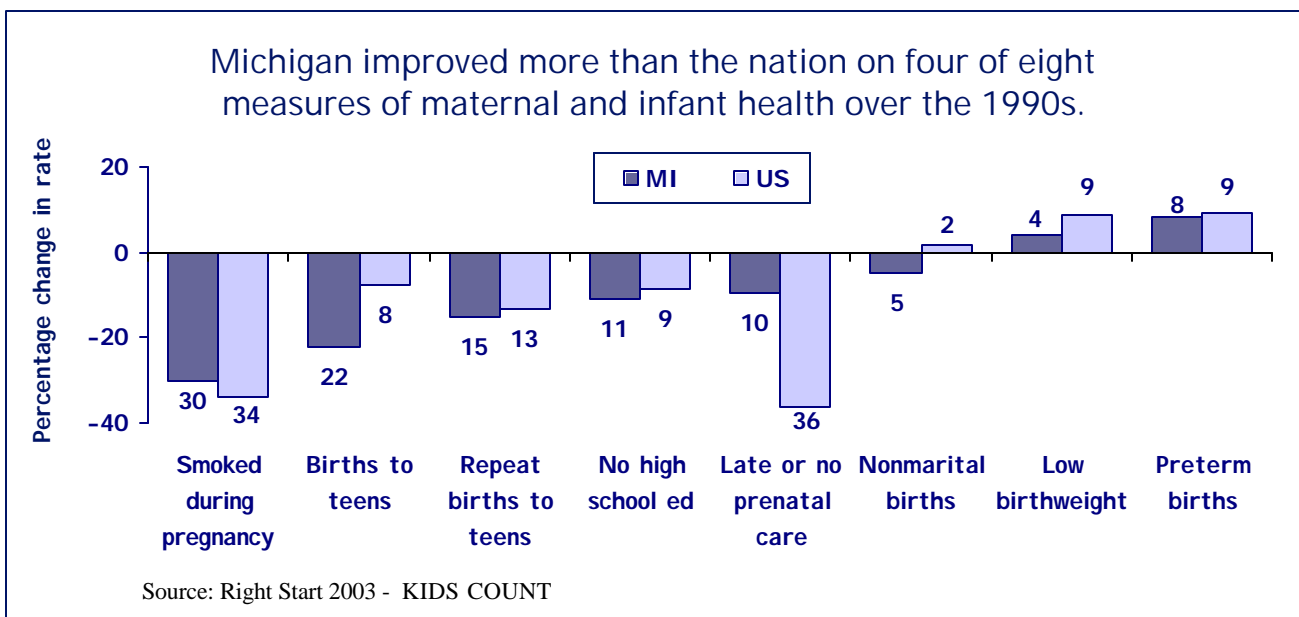
• **Better than average:**

- Less than 12 years of education - Michigan has a smaller share – 18 percent compared to 22 percent in the nation
- Teen births – Michigan stands at 11 percent compared to 12 percent in the nation

- **Worse than average:** Smoking during pregnancy - Michigan has a larger share– 16 percent compared to 12 percent in the nation

➤ **Michigan ranked in the top half of the 50 states on only two measures.**

- Best ranking (20th) for its share of births to teens under age 20 (11%)
- Worst ranking (33rd) on its share of low-birthweight babies (8%)



Over the 1990s Michigan improved on six of the eight measures.

- **Most substantial improvement:** smoking during pregnancy – dropping by 30 percent between 1990 and 2000, slightly less than the national decline of 34 percent.
- **Worst trends:** low birthweight babies and preterm births - both rose by 9 percent over the decade.



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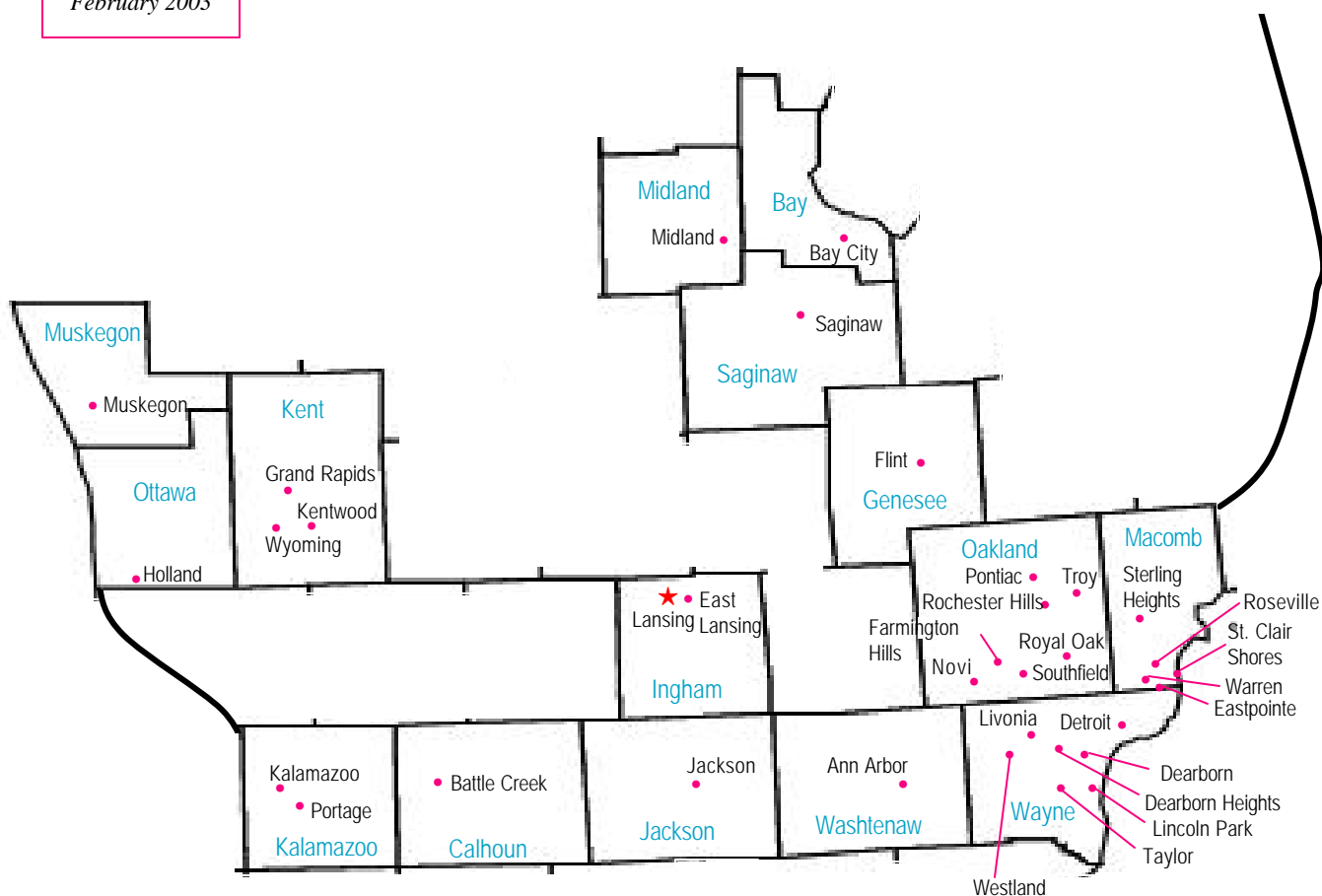
Right Start 2003

Michigan's 35 Largest Cities

Two of five of Michigan newborns in the year 2001 lived in one of the state's 35 largest cities (population of 25,000 or more).

Most (20) Michigan cities with this population size are concentrated in the three densely populated southeast counties-Wayne, Oakland, and Macomb. Eight are located in west Michigan.

Michigan's largest cities are located in 15 counties, and nine of the counties have only one city included.





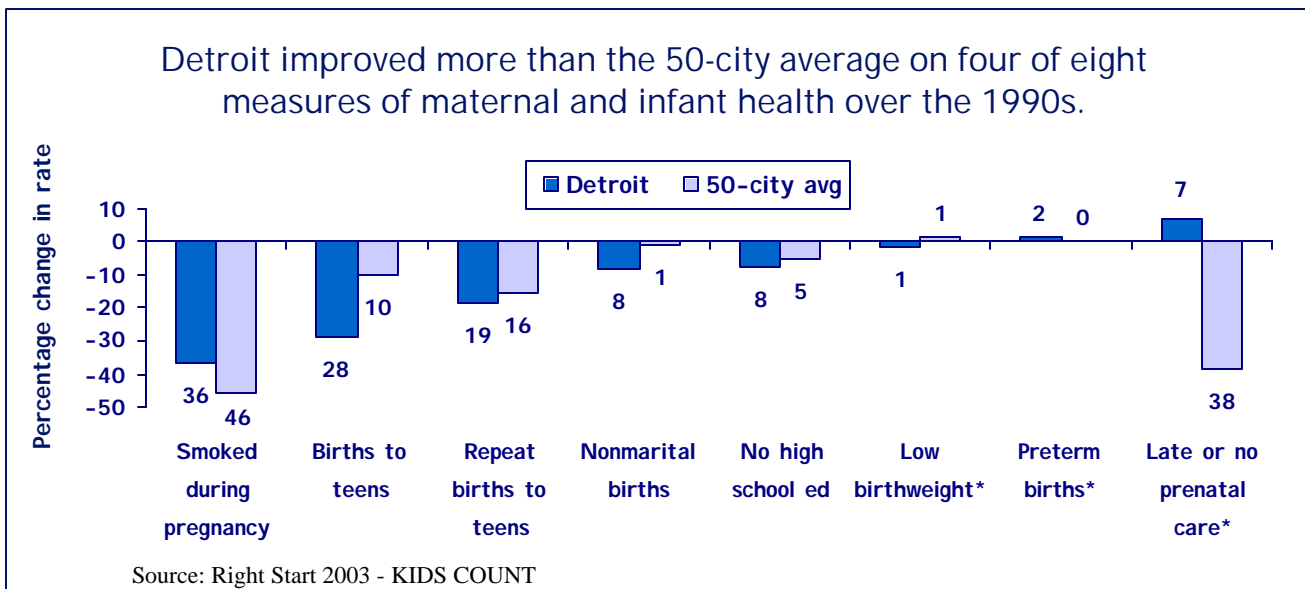
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Right Start 2003: City of Detroit

Right Start Measure (percent of live births)	Detroit	50-City Average	Detroit Rank
Repeat births to teens*	24.4	22.7	33
No high school education	34.6	27.4	38
Births to teens	17.2	13.8	40
Smoked during pregnancy	15.1	9.6	40
Late or no prenatal care	9.1	5.3	46
Unmarried women	69.0	43.4	48
Low birthweight	13.8	8.7	50
Preterm births	18.4	12.7	50

* percent of teen births
 Source: Right Start 2003 - KIDS COUNT

- **On all eight measures Detroit rates are higher than the 50-city average.**
 - Repeat teen births – smallest difference (2) between city and 50-city average.
 - Nonmarital births – the city’s largest percentage point difference (26) reflects the city’s economic distress and high unemployment rates among adult males.
- **Compared to 49 other largest cities in the nation, Detroit ranked in the bottom quarter on seven of the eight measures.**
 - Best ranking (33rd) for its share of repeat teen births 23 percent of all teen births compared to 24 percent in the 50-city average.
 - Worst (50th) for its shares of low birthweight babies (14%) and preterm babies (18%) compared to 9 and 13 percent, respectively.



*Changes were not statistically significantly at .05 level.

Detroit improved on five of the eight measures over the 1990s.

- **Biggest improvement:** Smoking during pregnancy – dropped by 36 percent although less than the decline of 46 percent in the 50-city average
- **Worst trend:** Late or no prenatal care – 7 percent increase in Detroit compared to 38 percent decline in 50-city average



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Right Start in Michigan' Largest Cities—2003:

Trends in Maternal and Infant Well-Being in Michigan's Urban and Non-Urban Areas

The largest declines in risk for both urban and non-urban infants occurred in the smaller shares of mothers who smoked during pregnancy and of mothers who were under the age of 20. While no measures showed worsening trends for urban infants, improvements on four measures were non-existent or minimal over the 12-year period. For non-urban infants, conditions improved on five measures and worsened on three.

The four measures of maternal and infant well-being where babies in Michigan's urban and non-urban areas improved between 1990 and 2001 included the following:

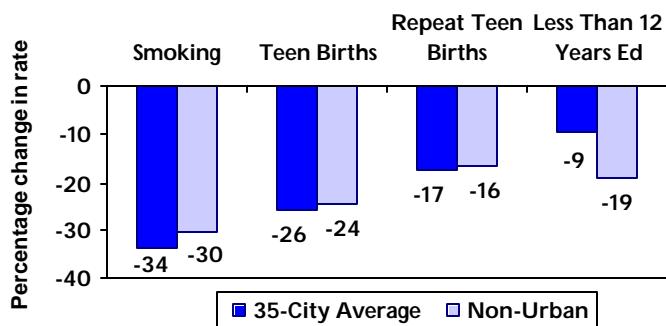
- Smoking During Pregnancy** decreased from 21 percent in 1990 to 14 percent in 2001. This was the only risk measure where cities had a lower average than non-urban areas where 17 percent of mothers smoked during pregnancy.

- Teen Births** dropped by 26 percent--from 17 to 12 percent of live births in 2001, compared to 9 percent of nonurban births.
- Repeat Teen Births:** (births to teens who have already borne a child) declined by 17 percent--from 29 percent in 1990 to 24 percent in 2001.
- Maternal Education** (mothers with less than 12 years of education) dropped by only 9 percent among urban infants, compared to a 19 percent decline in non-urban areas. Almost a quarter (23%) of all urban births are to mothers without a high school education compared to less than a fourth (17%) in non-urban areas.

For Michigan's 35-city average and non-urban areas, trends were mixed on four other maternal and infant well-being measures:

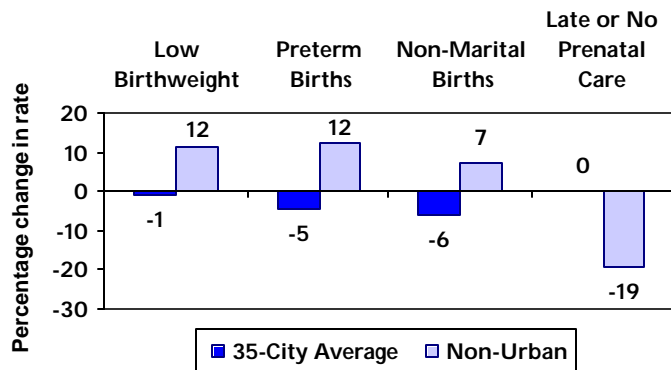
- Late or No Prenatal Care** did not improve for the average newborn in Michigan cities, but among non-urban babies the share dropped by 19 percent.
- Low-Birthweight Babies** hardly changed (1%) among urban infants while rising by 12 percent among non-urban infants.
- Preterm Births** decreased slightly (5%) among urban newborns and rose by 12 percent among non-urban infants
- Non-Marital Births** declined slightly (6%) in urban areas and rose by 7 percent in non-urban areas.

Both Michigan 35-city average and non-urban average improved on four key measures of maternal/infant well-being, 1990-2001



Source: Vital Records and Health Data Development Section, Michigan Department of Community Health

Trends varied on four measures for the Michigan 35-city average and non-urban areas, 1990-2001



Source: Vital Records and Health Data Development Section, Michigan Department of Community Health



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Right Start in Michigan' Largest Cities—2003: Births to Teens under Age 20

Most teen mothers have not completed high school nor married before the birth of their child so they face challenges in their ability to finish their education and support themselves and a child. Teen mothers experience higher rates of poverty and divorce over their lifetimes than those who delay childbearing and marriage. Only one of every five teen mothers receives any support from their child's father. Babies born to teen mothers are a higher risk of low-birthweight and neglect or abuse.

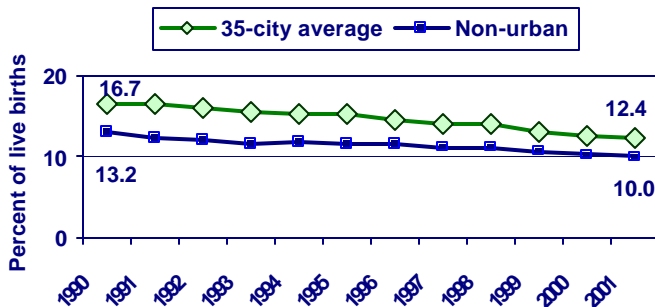
The share of teen births dropped by about 25 percent in both urban and non-urban areas. By 2001, 12 percent of births in urban areas were to teens, compared to 10 percent in non-urban areas. Although the teen birth rates remain higher among city youth, by the mid-1990s more babies were born to teen mothers in non-urban areas. In 2001, 6,993 teen births occurred in the state's non-urban areas compared to 6,665 in the largest cities.

Pregnancy and abortion rates have also declined among teens over the 1990s. Factors influencing these declines include an increased use of contraceptives, especially condoms, as well as long-term hormonal implants and injectables, such as Depo-Provera. Numerous local, state and federal initiatives have maintained a steady campaign to prevent teen pregnancy through abstinence or the effective consistent use of contraception.

Births to Teens under Age 20 in Michigan Cities (1999-2001 average)

Rank (based on percent)	Cities	Number (annual average)	Percent of live births
	Michigan	14,262	10.6
	35-city average	200	12.8
1	Troy	15	1.7
2	Rochester Hills	14	1.8
3	Farmington Hills	20	2.1
4	Livonia	27	2.5
5	Novi City	16	2.7
6	Royal Oak	24	3.1
7	Sterling Heights	53	3.5
8	East Lansing	11	3.7
9	Ann Arbor	51	3.8
10	Saint Clair Shores	27	4.2
11	Portage	34	5.9
12	Dearborn Heights	44	6.1
12	Eastpointe	26	6.1
14	Midland	33	6.2
14	Southfield	59	6.2
16	Roseville	48	7.4
17	Kentwood	62	7.5
17	Warren	129	7.5
19	Dearborn	144	7.6
20	Westland	95	7.8
21	Lincoln Park	63	11.4
22	Wyoming	144	12.3
23	Taylor	123	13.2
24	Bay City	86	13.5
25	Kalamazoo	217	13.8
26	Holland	116	14.3
27	Grand Rapids	585	14.5
28	Lansing	338	14.8
29	Battle Creek	179	15.7
30	Detroit	2,750	17.6
31	Saginaw	263	18.0
32	Pontiac	256	19.2
33	Flint	574	19.7
33	Muskegon	196	19.7
35	Jackson	183	19.9

The share of births to teens declined in Michigan over the 1990s in both urban and non-urban areas.



Source: Vital Records and Health Data Development Section, Michigan Department of Community Health - 2001 data

Note: Rankings are based on a rounded decimal rate.



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Right Start in Michigan' Largest Cities—2003: Teen Births to Teens, Ages 15-19, Who Were Already Mothers

The care of a second or third child by a teen mother often poses insurmountable barriers to completing a basic education or post-secondary training program. The expense of securing and affording full-time child care for two or three children could consume the wages of a low-income teen parent.

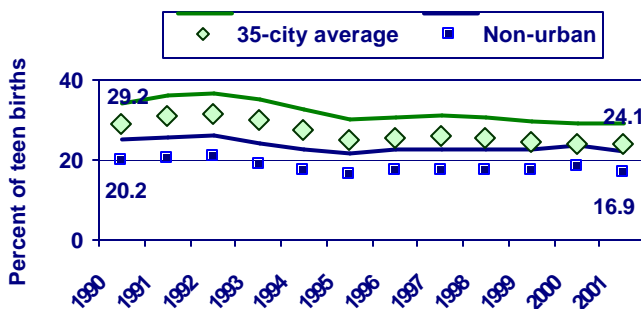
In 1990 a quarter of births to teens in Michigan's largest cities represented a second or third birth, but by 2001 that share had declined to just under a fifth of teen births. The share of teens with a previous birth also shrunk for non-urban youth, dropping from 20 to 17 percent of teen births.

Rising numbers or high rates of repeat teen births suggest the need for more access to pregnancy prevention programs targeted to this high risk group.

Births to Teens, Ages 15-19, Who Were Already Mothers in Michigan Cities (1999-2001 average)

Rank (based on percent)	Cities	Number (annual average)	Percent of teen births
	Michigan	2,936	20.9
	35-city average	47	24.2
1	Sterling Heights	4	7.5
2	Midland	3	9.0
3	Livonia	3	12.3
4	Eastpointe	3	13.2
5	Saint Clair Shores	4	13.8
6	Southfield	8	14.2
7	Ann Arbor	7	14.7
8	Lincoln Park	9	14.9
8	Novi City	2	14.9
8	Portage	5	14.9
11	Westland	15	15.5
12	Roseville	8	16.2
13	Dearborn Heights	7	16.7
14	Taylor	21	17.0
15	Farmington Hills	4	18.3
16	Wyoming	26	18.4
17	Warren	24	18.7
18	Royal Oak	5	19.2
19	Kentwood	12	20.1
20	Bay City	17	20.7
21	Muskegon	41	21.4
22	Holland	26	22.5
23	Battle Creek	40	22.6
23	Jackson	41	22.6
25	Dearborn	34	23.7
26	Kalamazoo	51	24.3
27	Detroit	686	25.7
28	Saginaw	67	25.8
29	Grand Rapids	151	26.5
30	Lansing	91	27.2
31	Flint	163	29.2
32	Pontiac	76	30.5
*	East Lansing	2	*
*	Rochester Hills	1	*
*	Troy	2	*

The share of teen mothers with previous births dropped over the 1990s in urban and non-urban areas.



Source: *Vital Records and Health Data Development Section, Michigan Department of Community Health - 2001 data*

Note: Rankings are based on a rounded decimal rate.



Right Start in Michigan' Largest Cities—2003: Births to Unmarried Women

One of every three births in Michigan was to an unmarried woman in 2001. Since 1990 the share has dropped slightly from 35 to 34 percent. Unmarried mothers often remain single parents, and children in single parent families have higher risk of poverty and high school dropout.

The risk of a non-marital birth decreases dramatically with age. Roughly 80 percent of Michigan teens giving birth in 2001 were not married, compared to half of women in their early 20s, and a quarter of those in their late 20s. By the time women gave birth in their 30s or 40s, the share of non-marital births dropped by half again, to roughly 13 percent.

Teens represented a quarter of all non-marital births compared to 40 percent for women in their early 20s. Women in their early 20s with their higher birth rates comprised the largest number (almost 18,000) of non-marital births.

Economic stability for children, however, may not result from marriage promotion policies. Unmarried and married fathers differ significantly, particularly in employment and education, according to the national Fragile Families and Child Well-being Study. Over a quarter of unmarried fathers of newborns were not working at a “steady job” during the week before the birth compared to less than 10 percent of married fathers. Unmarried fathers were twice as likely to have only a high school education as married fathers (41% compared to 20%).

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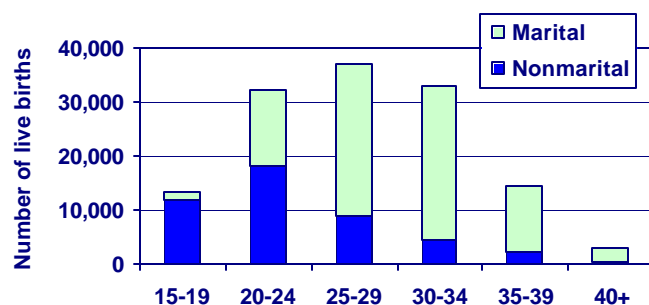
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Births to Unmarried Women in Michigan Cities (1999-2001 average)

Rank (based on percent)	Cities	Number (annual average)	Percent of live births
	Michigan	45,493	33.9
	35-city average	701	44.7
1	Troy	54	5.9
2	Rochester Hills	58	7.5
3	Farmington Hills	84	8.7
4	Dearborn	189	10.0
5	Livonia	108	10.2
6	Novi City	59	10.3
7	Royal Oak	89	11.4
8	Sterling Heights	196	12.8
9	Ann Arbor	204	15.1
10	Saint Clair Shores	106	16.3
11	East Lansing	54	18.0
12	Dearborn Heights	133	18.5
13	Midland	112	20.8
14	Portage	127	22.3
15	Eastpointe	101	23.9
16	Roseville	173	26.8
16	Warren	465	26.8
18	Kentwood	233	28.2
19	Westland	360	29.5
20	Southfield	310	32.6
21	Wyoming	394	33.6
22	Lincoln Park	185	33.7
23	Holland	281	34.7
24	Grand Rapids	1,766	43.7
25	Taylor	418	44.7
26	Bay City	292	46.1
27	Battle Creek	532	46.6
28	Kalamazoo	740	47.1
29	Lansing	1,104	48.3
30	Muskegon	549	55.4
31	Jackson	515	55.9
32	Saginaw	900	61.7
33	Pontiac	836	62.8
34	Flint	1,931	66.1
35	Detroit	10,864	69.3

Michigan women in their early 20s had the largest number of nonmarital births.



Source: Vital Records and Health Data Development Section, Michigan Department of Community Health - 2001 data

Note: Rankings are based on a rounded decimal rate.



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Right Start in Michigan' Largest Cities—2003:

Births to Women with Less than 12 Years Education

The education level of a mother is a key component to assuring the health and well-being of her children. Women who have completed their own basic education are more likely to have the maturity and skills to parent more effectively as well as access to health and education systems to promote the well-being of their children.

In 2001, almost a quarter (23%) of births in the cities were to women who had not completed a high school education compared to less than a fifth (17%) in the non-urban areas.

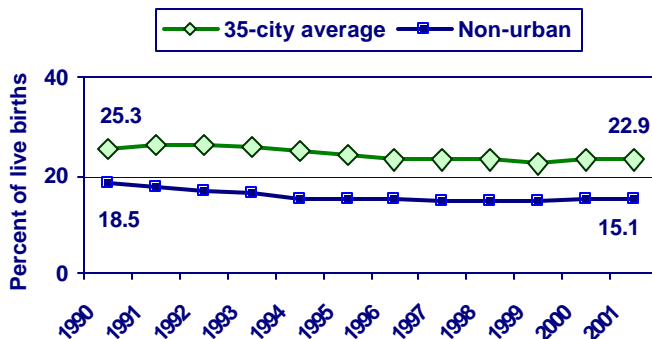
The differences among Michigan's largest cities were quite dramatic with nine cities having less than 5 percent of births to women without a high school education compared to over a quarter of infants in eight cities. This situation has significant implications for literacy efforts and barriers to parental involvement in the education of their children.

While progress occurred in both the state and in the 35 largest cities, the share of births to women with less than a high school education dropped by 19 percent for non-urban areas compared to only 9 percent in urban areas.

Births to Mothers with Less than 12 Years Education in Michigan Cities (1999-2001 average)

Rank (based on percent)	Cities	Number (annual average)	Percent of live births
	Michigan	22,985	17.1
	35-city average	357	22.8
1	Rochester Hills	20	2.6
2	Novi City	16	2.8
3	Royal Oak	23	2.9
4	Troy	27	3.0
5	Livonia	36	3.4
6	Ann Arbor	49	3.6
6	Farmington Hills	35	3.6
8	East Lansing	15	5.1
8	Saint Clair Shores	33	5.1
10	Southfield	57	6.0
11	Portage	36	6.4
12	Midland	45	8.3
13	Sterling Heights	129	8.4
14	Eastpointe	44	10.4
15	Dearborn Heights	77	10.7
16	Kentwood	100	12.1
17	Roseville	85	13.1
18	Westland	170	13.9
19	Warren	292	16.9
20	Kalamazoo	304	19.4
21	Wyoming	242	20.7
22	Lincoln Park	116	21.1
23	Jackson	204	22.1
24	Bay City	142	22.5
24	Dearborn	425	22.5
26	Lansing	522	22.8
27	Taylor	222	23.8
28	Battle Creek	304	26.6
29	Saginaw	400	27.5
30	Holland	230	28.4
31	Muskegon	290	29.3
32	Grand Rapids	1,238	30.6
33	Flint	913	31.3
34	Detroit	5,186	33.1
35	Pontiac	465	34.9

The share of infants born to a mother with less than 12 years of education declined more in the non-urban areas over the 1990s.



Source: Vital Records and Health Data Development Section, Michigan Department of Community Health - 2001 data

Note: Rankings are based on a rounded decimal rate.



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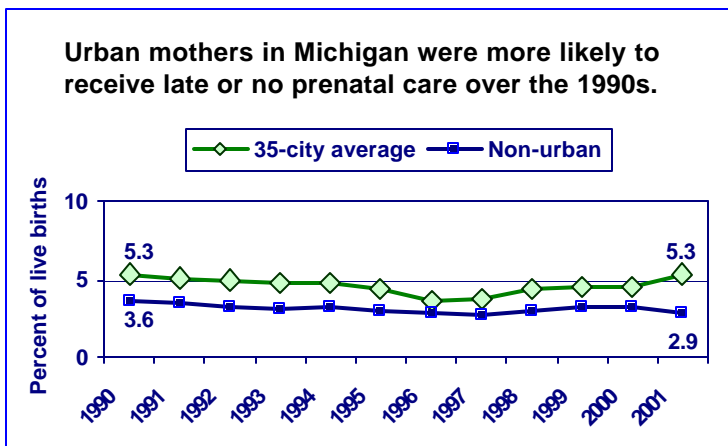
Births to Women Receiving Late or No prenatal Care

Mothers who live in the 35 largest cities in Michigan were consistently more likely to have received late or no prenatal care over the 1990s than their non-urban counterparts. (“Late” prenatal care begins in the third or last trimester of a pregnancy.) In 2001 5.3 percent of Michigan women in these urban areas received late or no prenatal care, compared to 2.9 percent of non-urban women. Both groups experienced decline in the mid-decade, but by 2001 the gap between the groups widened again.

Women who receive prenatal care are more likely to have a healthy pregnancy and birth. During prenatal care women learn about their nutritional needs during pregnancy and the importance of reducing the use of cigarettes, alcohol, and illegal drugs. Medical personnel have an opportunity to identify and treat potential problems before delivery.

A number of barriers, such as a lack of access to care or depression about the pregnancy may prevent women from seeking timely prenatal care. (Two of every five Michigan women giving birth in their 20s reported their pregnancy was unintended.)¹ In Michigan pregnant women without health insurance can qualify for Medicaid with incomes 85 percent above the poverty level (\$28,231 for a family of three in 2003).

¹ Yasmina M. Bouraoui, Bao-Ping Zhu, and Katherine McGrath-Miller, *Michigan PRAMS 2000 Report*. Lansing, MI: Michigan Department of Community Health. March 2002.



Source: Vital Records and Health Data Development Section, Michigan Department of Community Health - 2001 data

Births to Mothers Receiving Late or No Prenatal Care in Michigan Cities

(1999-2001 average)

Rank (based on percent)	Cities	Number (annual average)	Percent of live births
	Michigan	4,728	3.5
	35-city average	76	4.8
1	Novi City	4	0.8
1	Royal Oak	6	0.8
1	Troy	7	0.8
4	Portage	5	0.9
4	Rochester Hills	7	0.9
6	Midland	6	1.2
6	Saint Clair Shores	8	1.2
8	East Lansing	4	1.3
8	Farmington Hills	13	1.3
8	Livonia	14	1.3
11	Sterling Heights	25	1.6
12	Eastpointe	7	1.7
12	Roseville	11	1.7
14	Southfield	17	1.8
15	Ann Arbor	25	1.9
15	Warren	33	1.9
17	Lansing	54	2.3
18	Kentwood	20	2.4
19	Battle Creek	28	2.5
20	Dearborn Heights	19	2.6
20	Muskegon	25	2.6
22	Bay City	18	2.8
23	Wyoming	34	2.9
24	Kalamazoo	52	3.3
24	Westland	41	3.3
26	Saginaw	52	3.6
27	Dearborn	78	4.1
27	Holland	33	4.1
27	Lincoln Park	23	4.1
30	Grand Rapids	176	4.4
31	Taylor	43	4.6
32	Flint	142	4.9
33	Pontiac	74	5.6
34	Detroit	1,402	8.9
35	Jackson*	142	15.4

Note: Rankings are based on a rounded decimal rate.

*Number may be artificially high because of data coding problems in 2000.



Partners:

- Michigan League for Human Services
- Michigan's Children.

Source: *Vital Records and Health Data Development Section, Michigan Department of Community Health*

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Right Start in Michigan Cities—2003

Births to Women Who Smoked During Pregnancy

The share of Michigan women who reported smoking during pregnancy dropped by roughly a third over the 1990s—from 22 to 16 percent. Throughout the decade women who resided in Michigan’s largest cities were less likely to have smoked during pregnancy than their non-urban counterparts.

Smoking during pregnancy among both groups dropped by roughly a third so by the year 2001, 14 percent of mothers in urban areas had smoked during pregnancy compared to 17 percent in non-urban areas. These data are based on self-report, so with increased awareness of the ill effects of tobacco on the developing fetus, women may be less likely to admit to smoking during pregnancy.

Almost a quarter (23%) of all female smokers report having started smoking after age 20 compared to only 15 percent of male smokers.

Smoking during pregnancy increases the risk of low-birthweight, premature delivery, and infant death. For example, 28 percent of Michigan women who had smoked during the last three months of the pregnancy reported having a low-birthweight infant compared to 18 percent of women who had not.¹

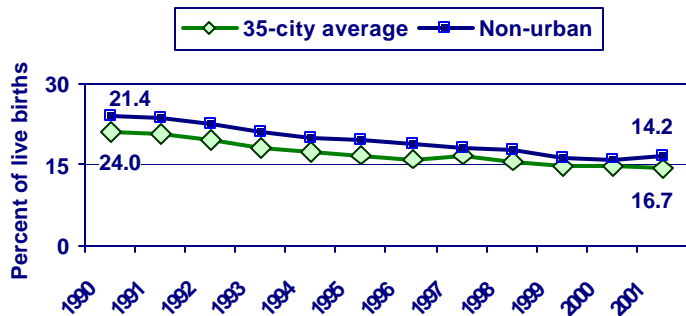
¹ *Michigan PRAMS 1999 Report*. Lansing, MI: Michigan Department of Community Health. February 2001.

Births to Mothers Who Smoked During Pregnancy in Michigan Cities

(1999-2001 average)

Rank (based on percent)	Cities	Number (annual average)	Percent of live births
	Michigan	20,815	15.5
	35-city average	228	14.5
1	Ann Arbor	32	2.4
2	East Lansing	10	3.2
3	Troy	37	4.1
4	Novi City	28	4.9
5	Rochester Hills	39	5.0
6	Southfield	49	5.1
7	Farmington Hills	51	5.3
8	Royal Oak	50	6.4
9	Dearborn	132	7.0
10	Holland	59	7.3
11	Livonia	79	7.4
12	Sterling Heights	153	10.0
13	Kentwood	85	10.3
14	Midland	57	10.7
15	Lansing	272	11.9
16	Portage	70	12.3
17	Grand Rapids	535	13.2
18	Wyoming	166	14.1
19	Saint Clair Shores	93	14.3
20	Detroit	2,280	14.6
21	Dearborn Heights	117	16.3
22	Pontiac	242	18.1
23	Jackson	176	19.1
24	Eastpointe	82	19.3
25	Westland	245	20.1
26	Flint	598	20.5
27	Saginaw	300	20.6
28	Kalamazoo	326	20.8
29	Warren	376	21.7
30	Battle Creek	255	22.4
31	Roseville	151	23.4
32	Muskegon	244	24.6
33	Lincoln Park	141	25.7
34	Bay City	174	27.4
35	Taylor	261	28.0

Smoking among pregnant mothers in Michigan declined in the largest cities as well as other areas over the 1990s.



Source: *Vital Records and Health Data Development Section, Michigan Department of Community Health - 2001 data*

Note: Rankings are based on a rounded decimal rate.



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Right Start in Michigan Cities—2003

Low-Birthweight Babies (less than five and a half pounds)

Women in Michigan's 35 largest cities were much more likely to have a low birthweight baby than women in non-urban areas. Roughly 10 percent of newborns in Michigan's largest cities weighed less than five and one-half pounds compared to 8 percent of newborns in non-urban areas in 2001. The share of low birthweight babies born to Michigan mothers in non-urban areas rose from 7 to 8 percent of births over the trend period.

Babies born weighing less than 2,500 grams (5 1/2 pounds) experience higher risk of developmental problems, chronic illness, and infant death. Over half of Michigan's low birthweight babies are placed in intensive care after birth.¹ Low birthweight is the second leading cause of death among all infants, and the leading cause among African American infants. Low birthweight has been linked to several factors, including smoking during pregnancy, domestic violence, inadequate nutrition, and stress.

The almost 70 percent of women in their teens and the one-third of women giving birth in their 20s, who relied upon Medicaid, were almost twice as likely to give birth to a low birthweight infant compared to women with personal income or private insurance for payment, according to Michigan's Pregnancy Risk Assessment Monitoring System (PRAMS) survey findings.²

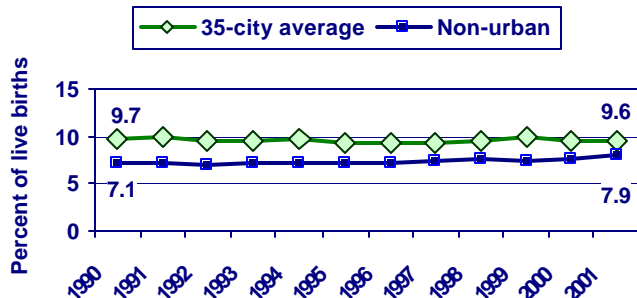
Low-Birthweight Babies in Michigan Cities (1999-2001 average)

Rank (based on percent)	Cities	Number (annual average)	Percent of live births
	Michigan	10,708	8.0
	35-city average	153	9.7
1	Holland	44	5.4
2	East Lansing	17	5.7
3	Eastpointe	24	5.8
3	Troy	53	5.8
5	Livonia	62	5.9
5	Novi City	34	5.9
7	Rochester Hills	47	6.0
8	Dearborn	115	6.1
9	Royal Oak	50	6.4
10	Portage	37	6.5
11	Dearborn Heights	48	6.7
11	Midland	36	6.7
13	Ann Arbor	92	6.8
13	Sterling Heights	104	6.8
15	Farmington Hills	69	7.2
15	Wyoming	84	7.2
17	Lincoln Park	40	7.3
18	Warren	128	7.4
19	Westland	91	7.5
20	Battle Creek	88	7.7
20	Kentwood	64	7.7
20	Saint Clair Shores	50	7.7
23	Roseville	51	7.8
24	Bay City	51	8.1
25	Taylor	77	8.2
26	Grand Rapids	339	8.4
27	Kalamazoo	135	8.6
28	Jackson	82	8.9
29	Lansing	205	9.0
29	Muskegon	89	9.0
31	Southfield	91	9.6
32	Saginaw	162	11.1
33	Pontiac	154	11.5
34	Flint	343	11.7
35	Detroit	2,185	13.9

¹ Michigan PRAMS 1999 Report. Lansing, MI: Michigan Department of Community Health. February 2001. p 42.

² Ibid. p. 13

Babies with low birthweight persisted at higher levels in urban areas and increased in nonurban areas in Michigan over the 1990s.



Source: Vital Records and Health Data Development Section, Michigan Department of Community Health - 2001 data

Note: Rankings are based on a rounded decimal rate.



Partners:

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Right Start in Michigan Cities—2003

Preterm Births

(less than 37 completed weeks of gestation)

Babies born too soon (before 37 completed weeks in the womb) may suffer serious health problems such as cerebral palsy, mental retardation, blindness or even death. They are also likely to be born too small. Two of five of Michigan’s “premies” in 2001 were born weighing less than five and a half pounds.

In Michigan 11 percent of babies are born too soon, and in the 35 largest cities, that share is slightly larger—12 percent. Over the 1990s preterm births declined slightly in the urban areas, but in the non-urban areas the share climbed from 10.6 to 11.8 percent.

Improvements in maternal health are key to preventing preterm births. Better access to care, particularly preconception and improved well-being of mothers before they start a pregnancy.

Babies who are born as part of a “multiple” birth are more likely to be born preterm. The 27 percent increase in multiple births in the U.S. over the last two decades has resulted primarily from fertility therapies.¹ The average U.S. hospital charge for a premature baby born in 2000 totaled \$58,000, compared with \$4,300 for a typical newborn.²

¹ Joyce A. Martin, Brady E. Hamilton, Stephanie L Ventura, Fay Menacker, Melissa M. Prk and Paul D. Sutton. *Births: Final Data for 2001*. National Vital Statistics Reports. Vol 51, No. 2. December 18, 2002.

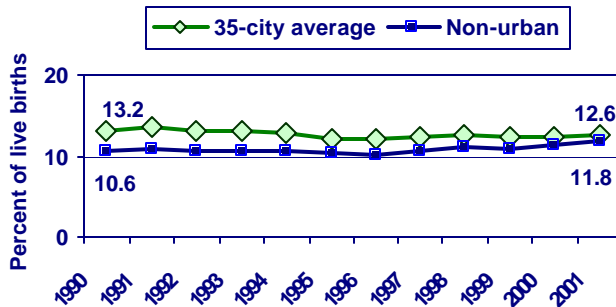
² “First Effective Treatment for Preterm Births” *HealthLINK* Yale-New Haven Hospital. April 7, 2003 .(http://www.ynhh.org/healthlink/womens/womens_4_03.html)

Preterm Births in Michigan Cities

(less than 37 completed weeks of gestation)
 (1999-2001 average)

Rank (based on percent)	Cities	Number (annual average)	Percent of live births
	Michigan	14,739	11.0
	35-city average	194	12.4
1	Ann Arbor	88	6.5
2	Holland	64	7.9
3	Livonia	90	8.5
4	Novi City	52	9.0
5	Rochester Hills	71	9.1
6	Troy	83	9.2
6	Westland	112	9.2
8	East Lansing	29	9.5
9	Eastpointe	40	9.6
10	Kentwood	81	9.8
11	Flint	288	9.9
11	Midland	53	9.9
13	Jackson	93	10.1
13	Sterling Heights	154	10.1
13	Warren	176	10.1
16	Farmington Hills	99	10.2
17	Portage	59	10.3
18	Dearborn Heights	75	10.4
18	Saint Clair Shores	68	10.4
18	Wyoming	121	10.4
21	Battle Creek	120	10.5
21	Dearborn	198	10.5
21	Royal Oak	82	10.5
24	Bay City	67	10.6
25	Lincoln Park	59	10.7
26	Muskegon	109	11.0
27	Roseville	72	11.1
28	Kalamazoo	176	11.2
29	Grand Rapids	458	11.3
30	Lansing	269	11.8
31	Taylor	115	12.3
32	Southfield	126	13.2
33	Pontiac	178	13.4
34	Saginaw	203	13.9
35	Detroit	2,660	17.0

Share of preterm births dropped slightly in urban areas while increasing among non-urban mothers in Michigan.



Source: *Vital Records and Health Data Development Section, Michigan Department of Community Health - 2001 data*

Note: Rankings are based on a rounded decimal rate.