BIRTH HIGHLIGHTS

In 2014, the number of resident live births in Nebraska increased for the third consecutive year, reaching its highest figure since 2009. A total of 26,794 live births were recorded among Nebraska women in 2014, compared to the 2013 tally of 26,094. Nebraska's 2014 live birth count translates into a rate of 14.2 live births per 1,000 population.

By birth order, the largest proportion of Nebraska's live births in 2014 was first-borns, accounting for 9,529 (35.7%) of all resident live births (excluding the 71 whose birth-order was unknown). Second-born children accounted for 8,585 (32.1%) of the state's live births in 2014, and third-born children accounted for another 4,953 (18.5%). The state's remaining 3,656 (13.7%) live births in 2014 were fourth-born and higher-order births. These percentages have changed little during the past 25 years: in 1989, first-borns accounted for 36.7% of Nebraska resident live births, followed by second-borns (32.9%), third-borns (19.1%), and fourth-born and higher-order births (11.4%).

Among Nebraska women who gave birth to their first child in 2014, the average age was 25.8 years. The average age among women giving birth to their first child has been increasing steadily for several decades; 25 years ago, in 1989, the average age for Nebraska women giving birth to their first child was 24.2 years. Among Nebraska women giving birth to their second and third children, the average age has also increased. For women bearing their second child, the average age at birth was 28.3 years in 2014, compared to 26.8 years in 1989, while for women bearing their third child, the average age was 30.0 years in 2014, compared to 28.6 years in 1989.

Although Nebraska women today are having children later than earlier generations, the majority of all births still occur among women in their twenties, although their share has diminished. In 2014, women 20-29 accounted for 53.2% of all Nebraska live births, compared to 39.5% for women 30-39, 5.3% for teenaged women, and 2.0% for women 40 and older. Twenty-five years ago, in 1989, women 20-29 accounted for 61.5% of all Nebraska live births, compared to 28.3% for women 30-39, 9.3% for teenaged women, and 0.9% for women 40 and older.

Nebraska's 2014 pregnancies included 436 sets of twins and 15 sets of triplets. There were no quadruplets born to Nebraska women in 2014. Twenty-five years ago, in 1989, Nebraska recorded 315 sets of twins and five sets of triplets. Although the number of multiple-birth deliveries among Nebraska women has increased steadily during this period, the proportion of all births that are the result of multiple-birth deliveries has been stable since the mid-1990s.

Nebraska's 2014 live births included 1,782 low birth weight babies, i.e., babies that weighed less than 2500 grams (about 5 ½ pounds) at birth. This figure translates into a low birth weight rate of 66.5 per 1,000 live births, an increase from the 2013 figure of 64.8. The 2014 low birth weight rate is still well above the state's all-time low rate of 52.8, which was recorded in 1990.

BIRTH HIGHLIGHTS (continued)

Among the low birth weight babies born to Nebraska women in 2014, 319 were of very low weight, i.e., they weighed less than 1500 grams (about 3.3 pounds) at birth. This figure translates into a very low birth weight rate of 11.9 per 1,000 live births, an increase from the 2013 figure of 11.6.

The Nebraska birth certificate was substantially revised in 2005, adding data that had never been gathered before and altering the way that some existing data are collected. As a result, some birth data are not comparable to data collected in years prior to 2005. One such variable affected in this way is the trimester when prenatal care began. These data are now based on the actual calendar date when prenatal care began, which improves their accuracy but also increases the amount of missing information. In 2014, birth certificate data showed that prenatal care began during the first trimester of pregnancy for 69.9% of all Nebraska live births; in 2005, this figure was 71.3%. The 2014 figure increases to 71.5% when births with missing data are excluded (by contrast, the 2005 figure was 75.3%). 2005 also marked the first year that Nebraska used the Kotelchuck Index as an indicator of the adequacy of prenatal care. This statistic combines information from the birth certificate concerning when prenatal care began and the number of prenatal visits from when prenatal care began to delivery. Using this measure, 17.2% of Nebraska's 2014 live births occurred among women who did not receive adequate prenatal care. In 2005, the first year that the Kotelchuk Index was calculated, the figure was 14.1%.

The number of live births that occurred among unmarried Nebraska women increased in 2014, from 8,689 in 2013 to 8,845 in 2014. The 2014 figure represents 33.0% of the state's total number of resident live births. Twenty-five years ago, in 1989, births to unmarried women accounted for 19.2% of Nebraska’s live birth total.

A total of 2,035 birth defects were diagnosed among 1,216 children born to Nebraska women in 2014. The latter figure translates into a rate of 45.1 cases per 1,000 resident live births and fetal deaths. However, these data include only those defects diagnosed and reported through July 1, 2015; as additional cases are diagnosed and reported to the state birth defects registry, the number and rate of birth defects diagnosed among babies born in Nebraska during 2014 will likely increase. In comparison, the birth defect rate among babies born in Nebraska during the previous four years (2008-2012) was 61.7. Defects of the circulatory system were the most frequently diagnosed conditions in Nebraska in 2014, accounting for 500 (24.6%) of all birth defects reported. Conditions affecting the musculoskeletal system were the second most frequently reported defects among Nebraska children in 2014, with 453 diagnoses, followed by genitourinary system defects, with 251 diagnoses. Nebraska’s 2014 data also show that birth defects were more likely to be diagnosed among low birth weight babies (less than 2500 grams), and males, and increase in frequency with increasing age of the mother.