PhilaStats Technical Notes

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Determining Philadelphia Residency and Planning District Residency
PhilaStats analyzes births and deaths of Philadelphia residents as recorded by the Pennsylvania (PA) Vital Registration System. The Pennsylvania Department of Health (PADOH) geocodes each birth and death record based on the residential address listed; if a record is geocoded to a location in Philadelphia County, the individual is considered a Philadelphia resident and included here, regardless of where the event occurred.

To assign each record to one of the 18 Planning Districts in Philadelphia, the City of Philadelphia's and PADOH's geocoding outputs are compared, and each record is assigned a precise location within the county using the best geocoding match. Some records can be placed in a ZIP code, but the location within the ZIP code—and thus, the Planning District—is unknown. For these cases, the Planning District is assigned probabilistically based on the ratio of residential addresses in a ZIP code that fall into each Planning District, using the United States Postal Service ZIP Code to Census Tract crosswalk file developed by the U.S. Department of Housing and Urban Development's Office of Policy Development and Research and an address-based Census Tract to Planning District crosswalk file developed internally by the City of Philadelphia. Records that cannot confidently be assigned to a Planning District are excluded from sub-county metrics.

Final vs. Preliminary Estimates
The PA Vital Registration System regularly sends preliminary birth and death certificate data to the Philadelphia Department of Public Health (PDPH). Most vital events are recorded and sent relatively quickly, so PDPH learns about them with only a minimal delay. The PA Vital Registration System releases final data after the records have been checked for accuracy and completeness, which typically occurs about 18 months after the close of a calendar year. PhilaStats includes preliminary birth and death data that have not yet gone through this validation process. When final data for a year are released, they will replace preliminary data posted on OpenDataPhilly. The differences between preliminary and final data are generally small, but these differences may alter estimates, especially for rare events. Use caution when relying on a preliminary estimate.

Race and Ethnicity
In addition to statistics for the total population, PhilaStats includes statistics for the following race/ethnicity groups: non-Hispanic White alone, non-Hispanic Black alone, non-Hispanic Asian or Pacific Islander alone, non-Hispanic multiracial (i.e., two or more races), and Hispanic. The total population of Philadelphia is larger than the sum of these five groups because not everyone fits into these five categories. Population estimates for each of these groups are from the Census Bureau Annual County Resident Population Estimates by Age, Sex, Race, and Hispanic Origin.

Since 2003, Pennsylvania birth and death certificates have employed a check box format for race/ethnicity and collect both multiple races and a self- or next of kin-designated single race category. In keeping with PADOH's reporting procedure, the birthing person's or decedent's multiple race designation is utilized. These data are combined with the ethnicity designation of

Hispanic or not Hispanic to create race/ethnicity categories. The non-Hispanic Black category includes Black and African American. The non-Hispanic Asian/Pacific Islander category includes Asian Indian, Chinese, Filipino/a/x, Japanese, Korean, Vietnamese, other Asian, Native Hawaiian, Guamanian or Chamorro, Samoan, and other Pacific Islander. The non-Hispanic multiracial category includes any two or more races. The Hispanic category includes Mexican, Mexican American, Chicano/a/x, Puerto Rican, Cuban, and other Spanish, Hispanic, or Latino/a/x. In keeping with federal guidelines issued by the National Center for Health Statistics (NCHS), birth data are tabulated by race/ethnicity of the birthing person, as self-reported on the birth certificate.

Age Categories

Select population, mortality, and natality metrics are examined by different age categories (in addition to overall calculations including all ages). Population estimates are in 5-year age categories from 0-84 and 85+; and in four larger age categories (<20, 20-44, 45-64, 65+). Life expectancy is calculated from life tables with the following age categories: <1, 1-4, then 5-year age categories 5-84, and 85+. Leading causes of death are examined in the following age categories: 0-4, 5-14, 15-24, 25-44, 45-64, 65+. Smoking-attributable deaths are examined for ages 35+. Infant (including neonatal and post-neonatal), fetal, and perinatal deaths include only those aged <1. All natality metrics, except for crude birth rate and teen birth rate, are examined by the following categories based on the mother's age: 10-14, 15-17, 18-19, 5-year age categories from 20-44, and 45+. The crude birth rate uses the same categories but collapses 15-17 and 18-19 into 15-19, and teen birth rate is only examined for ages 15-19.

Maps and Geographies

The maps created for this report use TIGER/line census tract shapefiles from the Census Bureau and Planning District boundaries determined by the City of Philadelphia. According to the Census Bureau, census tracts are small, relatively permanent statistical subdivisions of a county. They have an optimum population size of 4,000 people, but the spatial size can vary widely based on the population density of the area. Census tract borders may be updated upon each decennial census. Philadelphia Planning Districts are 18 similarly sized subdivisions of the city that were created by the Philadelphia City Planning Commission (PCPC) for comprehensive planning. These Districts facilitated planning by focusing recommendations and project proposals on a more local level. Each district also has a distinct geography and development history that means neighborhoods within a district often have similar concerns. The current boundaries were last revised for the Phila2035 comprehensive plan to follow natural or logical borders, such as rivers or train lines, and align with census tract boundaries. The coordinate system used for all maps is North American Datum of 1983 (NAD 1983) State Plane Pennsylvania South FIPS 3702 Feet, with a Coordinate Reference System (CRS) value of 4269.

Population

The denominators for birth and death rates are from the Census Bureau Annual County Resident Population Estimates by Age, Sex, Race, and Hispanic Origin for July 1 of each year. The

denominators for rates by Planning District are aggregated from the [Decennial Census table P12, Sex by Age by census tract](#) into Planning Districts.

Rates

Rates within an age group are calculated as the number of events divided by the population in the age group. Rates for a population that includes multiple age groups are age-adjusted to control for differences in population structure. Age-adjusted rates have been computed by the direct method—that is, by applying the observed age-specific rates to the 2000 projected U.S. population, as recommended by the U.S Department of Health and Human Services. We employed statistical approaches adapted from the [National Vital Statistics Reports, Volume 70, Number 8](#). Vital records with missing age information are not included in the age-adjustment calculation. Age-adjusted rates are not comparable with crude rates.

Calculations for teen birth rates have been adapted to align with CDC methodology found within the [Reproductive Health: Teen Pregnancy report](#).

Suppression

Following guidance from NCHS and PADOH, counts less than ten and rates based on counts less than ten for any tabulation by population group (e.g., sex, age, race/ethnicity) are replaced with the value -99999, and a quality concern flag indicates that the metric is suppressed. Counts less than ten for the city population as a whole are reported. Rates and percentages based on counts of events between ten and 20 have a quality concern flag indicating that the metric is unreliable.

In Philadelphia, the non-Hispanic multiracial population is relatively small—about 2% of residents identify this way. Due to the small population size, estimates are less reliable (and thus, more likely to be suppressed) than estimates based on larger population groups, and certain metrics (i.e., rates and life expectancy estimates) are not presented for this group. Use caution when interpreting results for this group.

Totals and Categories

The sum of categories may not equal the totals in cases where information is missing. For example, if an infant's sex is unknown, that birth will be counted in the total number of births but will not contribute to the number of either male or female births.

Natality

PhilaStats summarizes live births, which per Pennsylvania law refers to the expulsion or extraction from the birthing person of a product of conception, irrespective of the period of gestation, which shows any evidence of life at any moment after such expulsion or extraction. Fetal deaths are summarized separately. Births are tabulated by characteristics of the birthing person (e.g., age, race/ethnicity) and by characteristics of the infant (e.g., birth weight).

<u>Birth Weight</u>
Birth weight should be measured within one hour of birth. Normal birth weight is a weight of 2,500 grams (5 pounds 8 ounces) or greater. Low birth weight is a weight of less than 2,500 grams. Moderately low birth weight is a weight of less than 2,500 grams and greater than 1,500 grams (3 pounds 5 ounces), and very low birth weight is a weight of less than 1,500 grams.

<u>Gestation</u>
A birth is considered to be at term if it occurs between 37 and 41 weeks of gestation. Preterm births occur at less than 37 weeks of gestation and post-term births at more than 41 weeks of gestation.

<u>Prenatal Care</u>
Prenatal care is considered to begin in the first trimester if the first visit happens within 92 days after the last normal menses, in the second trimester if it happens between 92 and 182 days, and in the third trimester if it happens after 183 days. This calculation is based on updated <u>recommendations from PADOH</u>. Prenatal care initiation in the third trimester is considered late initiation.

Mortality

<u>Causes of Death</u>
Cause of death is based on the underlying cause of death field from the death certificate. The underlying cause is the disease or injury that initiated the train of events leading directly to death or the circumstances of the injury that produced the fatal injury. PADOH codes the cause of death according to the International Classification of Diseases, Tenth Revision (ICD-10) of the World Health Organization.

PDPH follows guidelines issued by the National Center for Health Statistics (NCHS) in the classification of leading causes of death statistics, specifically Table B (List of 113 Selected Causes of Death, Enterocolitis Due to *Clostridium Difficile*, and COVID-19) from the <u>Instruction Manual Part 9</u>. Table B is used for the general analysis of mortality and for ranking leading causes of death.

<u>Infant Mortality</u>
The infant mortality rate is the ratio of infant deaths to live births, the neonatal mortality rate is the ratio of neonatal deaths to live births, and the post-neonatal mortality rate is the ratio of post-neonatal deaths to live births. Neonatal deaths occur within 28 days after birth, post-neonatal deaths occur between 28-364 days after birth, and infant deaths occur within 364 days after birth. When reported with a racial/ethnic classification, the race/ethnicity of deceased infants (numerator) is based on the recorded death file, and the race/ethnicity of live births (denominator) is based on the birthing person's race/ethnicity. In cases where race/ethnicity data is missing in the death file, the birthing person's race/ethnicity from the birth file from the PA Department of Health is consulted.

Perinatal Mortality

The perinatal mortality rate is the ratio of perinatal deaths to live births. Perinatal deaths are defined as fetal deaths that occur at or after 28 weeks of gestation and infant deaths within 7 days after birth. When reported for a racial/ethnic classification, the race/ethnicity of deceased fetuses and infants (numerator) is based on the recorded death file, and the race/ethnicity of live births (denominator) is based on the birthing person's race/ethnicity.

Life Expectancy

This report calculates life expectancy from a life table constructed according to the Chiang method (Chiang CL, *The Life Table and Its Applications*, 1984) following *Life Expectancy at Birth: Methodological Options for Small Populations* from National Statistics Methodological Series No. 33 (Toson B, Office for National Statistics, 2003). The infant population is estimated as the difference between births and infant deaths for a given year.

Years of Potential Life Lost

Years of potential life lost (YPLL) is a measure of premature mortality, based on estimating the average years a person would have lived if he or she had not died prematurely. The reference age used in this report is 75. For deaths among people under 75, YPLL is calculated by subtracting age at death from 75; for people aged 75 and over, YPLL is set to 0. Total YPLL represents the sum of these individual YPLL estimates.

Smoking-Attributable Mortality

Smoking-attributable mortality, morbidity, and economic costs (SAMMEC) are calculated following *The Health Consequences of Smoking - 50 Years of Progress: A Report of the Surgeon General* (US Department of Health and Human Services, CDC, 2014). Given information on 1) the relative risks of attributable causes by age and sex, 2) the local prevalence of smoking by age and sex, and 3) counts of deaths due to attributable causes by age, race/ethnicity, and sex, SAMMEC can be used to estimate the mortality impact of smoking. The annual local smoking prevalence is a rolling average of the three most recent years calculated from the Behavioral Risk Factor Surveillance System (BRFSS).

Alcohol-Attributable Mortality

The Alcohol-Related Disease Impact (ARDI) methodology is another public health analysis tool developed by the CDC. Methodological details can be found at the ARDI website. Given information on 1) the relative or direct risks of attributable causes by age and sex, 2) the local prevalence of low, medium, and high alcohol consumption by age, race/ethnicity, and sex, and 3) counts of deaths due to attributable causes by age, race/ethnicity, and sex, ARDI can be used to estimate the mortality impact of alcohol consumption. The annual local alcohol consumption prevalence is a rolling average of the three most recent years calculated from BRFSS. Only deaths due to conditions for which alcohol is a risk factor are included in the calculation.

Social Determinants of Health

<u>Definition</u>
Social or structural determinants of health are the created conditions in which people are born, live, learn, work, play, worship, and age which influence health. These conditions are shaped by larger systems and forces including:

- Social systems (systems of oppression like racism, sexism, classism, etc.)
- Economic systems (housing policy, income inequality, etc.)
- Political systems (political will and representation, special interest groups, voter suppression, etc.)
- Physical systems (built environment like sidewalk infrastructure and public parks, public transportation, etc.)

Although systems and forces can be difficult to measure, population data such as income, educational attainment, and race and ethnicity can be used to understand and describe the burden of these systems on community health and well-being. This report includes 8 metrics on Social Determinants of Health to allow for comparison and contextualization of the reported mortality and natality outcomes at the city-wide and planning district levels. Metrics are collected at the city level and at the census tract level. Census tract-level metrics are aggregated to Philadelphia planning districts by using an internal census tract to planning district crosswalk.

<u>Poverty</u>
Poverty is expressed as the population below [Federal Poverty Level] as a percentage of the total civilian non-institutionalized population from the US Census Bureau's American Community Survey table B17020.

<u>Unemployment</u>
Unemployment is [defined by the US Census Bureau] as civilians 16 years or older who "(1) were neither "at work" nor "with a job but not at work" during the reference week, and (2) were actively looking for work during the last 4 weeks, and (3) were available to accept a job. Also included as unemployed are civilians who did not work at all during the reference week, were waiting to be called back to a job from which they had been laid off, and were available for work except for temporary illness." Unemployment is expressed as the percentage of those who meet the census criteria for unemployment out of the population eligible for employment, those 16 years or older. This metric was calculated from the US Census Bureau's American Community Survey table S2301.

<u>Older Adult Population</u>
The older adult population is calculated using the population 65 years or older as a percentage of the total population from the US Census Bureau's American Community Survey table S0101.

<u>Educational Attainment</u>
Educational attainment is calculated by adding the number of individuals with a graduate or professional degree to the number of individuals with a bachelor's degree, dividing by the total

civilian non-institutionalized population age 25 years or older, and multiplying by 100. This percentage is then subtracted from 100 to show the percentage of the adult population that has not yet attained a bachelor's degree or higher. These data are from the US Census Bureau's American Community Survey table S1501.

Race and Ethnicity

The percent of the population who identify as non-Hispanic Black alone, non-Hispanic Asian or Pacific Islander alone, non-Hispanic White alone, non-Hispanic multiracial, and Hispanic is calculated by dividing the count in each category by the total population and multiplying by 100. These data come from the US Census Bureau's American Community Survey table B03002 and the Decennial Census summary file 1 table P5, Hispanic or Latino Origin by Race. Each race-specific category (Black, White, and Asian/Pacific Islander) includes only those who identified as that race alone, and the multiracial category includes those who identified as two or more races. The Hispanic ethnicity category includes those of any race or combination of races who identified as being of Hispanic or Latino origin.

Lack of Primary Care Use – No Checkup in Past Year

The lack of primary care use metric is calculated by taking an estimate of the population who reported that they saw a doctor in the past year for an annual checkup as a percentage of the total population. This percentage is then subtracted from 100 to find the percentage of those who did not see a doctor in the past year. The Centers for Disease Control and Prevention report this metric at the census tract level as part of their small-area estimates program for Behavioral Risk Factor Surveillance System (BRFSS) data called "PLACES".

Health Insurance

The health insurance status metric is calculated using the population without health insurance as a percentage of the total civilian noninstitutionalized population. These data are from the US Census Bureau's American Community Survey table S2701.

Population with a Disability

The percent of the population with a disability is calculated by dividing the count of those who have difficulty with at least one of the following: hearing, vision, ambulatory, cognitive, self-care, or independent living, by the total population and multiplying by 100. These data are from the US Census Bureau's American Community Survey table S1810.

Metrics

All metrics included in the tables on OpenDataPhilly are listed below. Various symbols indicate how the metric is broken down:
- * – by leading causes of death
- + – by race/ethnicity
- # – by sex
- ^ – by age

Planning district metrics are not broken down by demographic characteristics; the only exception is life expectancy by sex.

Metric description	Metric name in OpenDataPhilly table	Metric Definitions
Mortality Metrics		
Age-adjusted alcohol-attributable mortality rate per 100,000 population +#	age_adjusted_alcohol_attributable_mortality_rate_per_100k	Age-adjusted mortality rates allow the comparison of mortality between population groups, even though the size of the groups or the age of group members might be very different. This shows deaths due to causes attributable to alcohol per 100,000 population.
Age-adjusted mortality rate per 100,000 population *+#	age_adjusted_mortality_rate_per_100k	Age-adjusted mortality rates allow the comparison of mortality between population groups, even though the size of the groups or the age of group members might be very different. Should be viewed as a relative, rather than actual, measure of risk. Calculated for all ages, not for specific age groups.
Age-adjusted smoking-attributable mortality rate per 100,000 population +#	age_adjusted_smoking_attributable_mortality_rate_per_100k	Age-adjusted mortality rates allow the comparison of mortality between population groups, even though the size of the groups or the

		age of group members might be very different. This shows deaths among those aged 35+ due to causes attributable to smoking per 100,000 population aged 35+.
Age-adjusted years of potential life lost (YPLL) to age 75 per 100,000 population +#	age_adjusted_years_of_potential_life_ lost_to_age_75_per_100k	A measure of premature mortality that estimates the total number of years of life lost by persons who suffered early death, defined here as death before age 75. Metric is age-adjusted to allow the comparison of mortality between population groups, even though the size of the groups or the age of group members might be very different.
Alcohol-attributable deaths +#	alcohol_attributable_deaths	The number of deaths from various causes that are directly attributable to alcohol.
Count of deaths *+#^	count_deaths	A count of deaths to Philadelphia residents.
Count of fetal deaths +	count_fetal_deaths	A count of deaths that occurs at or after 20 weeks of gestation but before birth.
Count of infant deaths +	count_infant_deaths	A count of deaths that occurs within 364 days of a live birth.
Count of neonatal deaths +	count_neonatal_deaths	A count of infant deaths that occurs within 28 days of a live birth.
Count of perinatal deaths +	count_perinatal_deaths	A count of fetal deaths that occur at or after 28 weeks of gestation or an

		infant death that occurs within 7 days after birth.
Count of post-neonatal deaths +	count_post_neonatal_deaths	A count of infant deaths that occurs more than 28 days after a live birth.
Crude years of potential life lost (YPLL) to age 75 *+#	crude_years_of_potential_life_lost_to_age_75	A measure of premature mortality that estimates the total number of years of life lost by persons who suffered early death, defined here as death before age 75. Calculated for all ages, not for specific age groups.
Infant mortality rate per 1,000 live births +	infant_mortality_rate_per_1k_live_births	The ratio of infant deaths to 1,000 live births.
Life expectancy at beginning of age interval +#^	life_expectancy	The average number of additional years that a person of a given age can expect to live, if current mortality rates do not change.
Neonatal mortality rate per 1,000 live births +	neonatal_mortality_rate_per_1k_live_births	The ratio of infant deaths that occurs within 28 days of a live birth.
Percent alcohol-attributable deaths out of all causes of death +#	percent_alcohol_attributable_deaths_ out_of_all_cause_deaths	The percentage of deaths from various causes that are attributable to alcohol.
Percent of leading causes of death out of all causes of death *+#^	percent_deaths_out_of_all_cause_deaths	The percentage of all deaths accounted for by the cause of interest.
Percent smoking-attributable deaths (by cause) out of smoking-attributable deaths +#	percent_smoking_attributable_causes_out_of_ smoking_attributable_deaths	The percentage of deaths among adults 35+ from various causes that are attributable to smoking.
Percent smoking-attributable deaths out of all causes of death +#	percent_smoking_attributable_deaths_ out_of_all_cause_deaths	The percentage of deaths among adults 35+ from all causes that are attributable to smoking.

Perinatal mortality rate per 1,000 live births +	perinatal_mortality_rate_per_1k_live_births	The ratio of perinatal deaths (fetal deaths that occur after 28 weeks gestation + infant deaths within seven days of birth) to 1,000 live births.
Post-neonatal mortality rate per 1,000 live births +	post_neonatal_mortality_rate_per_1k_live_births	The ratio of infant deaths that occurs more than 28 days after a live birth.
Smoking-attributable deaths +#	smoking_attributable_deaths	The number of deaths among adults 35+ from various causes that are attributable to smoking.
Natality Metrics		
Count of births +^	count_births	Live births to Philadelphia residents.
Crude birth rate per 1000 residents +^	crude_birth_rate_per_1000	The ratio of live births per 1,000 population.
Count of births to teens +	count_teen_births	Live births to Philadelphia residents aged 15-19 years.
Crude rate of births to teens (15-19 Years) per 1000 female residents ages 15-19 years old +	teen_births_crude_rate_per_1000	The ratio of live births per 1,000 Philadelphia residents aged 15-19 years.
Count of normal birth weight (>=2,500g) Births +^	count_normal_birthweight_births	Weight at birth greater than or equal to 2,500 grams (5.512 lbs).
Percent of births that are normal birth weight (>=2,500g) +^	percent_normal_birthweight_births	Weight at birth greater than or equal to 2,500 grams (5.512 lbs)
Count of moderately low birth weight (1,500-2,499g) births +^	count_moderately_low_birthweight_births	Weight at birth between 1,500-2,499 grams (3.307-5.509 lbs).
Percent of births that are moderately low birth weight (1,500-2,499g) +^	percent_moderately_low_birthweight_births	Weight at birth between 1,500-2,499 grams (3.307-5.509 lbs).

Count of low birth weight (under 2,500 grams) births +	count_low_birthweight_births	Weight at birth less than 2,500 grams (5.512 lbs).
Percent of births that are low birth weight (under 2,500 grams) +	percent_low_birthweight_births	Weight at birth less than 2,500 grams (5.512 lbs).
Count of very low birth weight (under 1,500 grams) births +^	count_very_low_birthweight_births	Weight at birth less than 1,500 grams (3.307 lbs).
Percent of births that are very low birth weight (under 1,500 grams) +^	percent_very_low_birthweight_births	Weight at birth less than 1,500 grams (3.307 lbs).
Count of post-term births +^	count_postterm_births	A birth occurring at more than 41 weeks of gestation.
Percent of births that are post-term +^	percent_postterm_births	A birth occurring at more than 41 weeks of gestation.
Count of at-term births +^	count_term_births	A birth occurring between 37 and 41 weeks of gestation.
Percent of births that are at term +^	percent_term_births	A birth occurring between 37 and 41 weeks of gestation.
Count of preterm births +^	count_preterm_births	A birth occurring at less than 37 weeks of gestation.
Percent of births that are preterm +^	percent_postterm_births	A birth occurring at less than 37 weeks of gestation.
Count of births delivered via spontaneous vaginal route +^	count_spontaneous_vaginal	Delivery of the entire fetus through the vagina by the natural force of labor with or without manual assistance from the delivery attendant.
Percent of births delivered via spontaneous vaginal route +^	percent_spontaneous_vaginal	Delivery of the entire fetus through the vagina by the natural force of labor with or without manual

		assistance from the delivery attendant.
Count of births delivered via vaginal forceps route +^	count_vaginal_forceps	Delivery of the fetal head through the vagina by the application of obstetrical forceps to the fetal head.
Percent of births delivered via vaginal forceps route +^	percent_vaginal_forceps	Delivery of the fetal head through the vagina by the application of obstetrical forceps to the fetal head.
Count of births delivered via vaginal vacuum route +^	count_vaginal_vacuum	Delivery of the fetal head through the vagina by the application of a vacuum cup or ventouse to the fetal head.
Percent of births delivered via vaginal vacuum route +^	percent_vaginal_vacuum	Delivery of the fetal head through the vagina by the application of a vacuum cup or ventouse to the fetal head.
Count of births delivered via cesarean section route +^	count_cesarean	Extraction of the fetus, placenta, and membranes through an incision in the birthing person's abdominal and uterine walls.
Percent of births delivered via cesarean section route +^	percent cesarean	Extraction of the fetus, placenta, and membranes through an incision in the birthing person's abdominal and uterine walls.
Count of births admitted to NICU +	count_nicu_admissions	A birth requiring admission to the newborn intensive care unit.
Percent of births admitted to NICU +	percent_nicu_admissions	A birth requiring admission to the newborn intensive care unit.
Count of births with late or no prenatal care +	count_late_or_no_prenatal_care	Birthing person had prenatal care beginning in the third trimester, or had no prenatal care.

Percent of births with late or no prenatal care +	percent_late_or_no_prenatal_care	Birthing person had prenatal care beginning in the third trimester, or had no prenatal care.
Count of births with no prenatal care +	count_no_prenatal_care	Birthing person had no prenatal care.
Percent of births with no prenatal care +	percent_no_prenatal_care	Birthing person had no prenatal care.
Count of births with first prenatal care visit in the first trimester+^	count_prenatal_care_first_trimester	Birthing person had prenatal care beginning within 92 days of the last normal menses.
Percent of births with first prenatal care visit in the first trimester+^	percent_prenatal_care_first_trimester	Birthing person had prenatal care beginning within 92 days of the last normal menses.
Count of births with first prenatal care visit in the second trimester+^	count_prenatal_care_second_trimester	Birthing person had prenatal care beginning between 92 and 182 days after the last normal menses.
Percent of births with first prenatal care visit in the second trimester+^	percent_prenatal_care_second_trimester	Birthing person had prenatal care beginning between 92 and 182 days after the last normal menses.
Count of births with first prenatal care visit in the third trimester+^	count_prenatal_care_third_trimester	Birthing person had prenatal care beginning after 183 days after the last normal menses.
Percent of births with first prenatal care visit in the third trimester+^	percent_prenatal_care_third_trimester	Birthing person had prenatal care beginning after 183 days after the last normal menses.
Social Determinants of Health Metrics		
Percent of population in poverty	percent_of_population_in_poverty	The percentage of the civilian, noninstitutionalized population with

		income equal to or less than 100% of the Federal Poverty Level.
Percent of adult population without bachelor's degree	percent_of_adult_population_without_bachelors_degree	The percentage of the population over 25 years of age that has not attained a bachelor's degree or graduate or professional degree.
Unemployment rate in population 16 and older	unemployment_rate_in_population_16_and_older	The percentage of the population age 16 and older who do not have a job and are actively looking for a job.
Percent of population age 65 or older	percent_of_population_age_65_or_older	The percentage of the population that is age 65 or older.
Percent of population without health insurance	percent_of_population_without_health_insurance	The percentage of the population that does not have health insurance.
Percent of population with a disability	percent_of_population_with_a_disability	The percentage of the population that has difficulty with at least one of the following: vision, hearing, self-care, ambulatory, cognitive, or independent living.
Percent of population identifying as non-Hispanic White	percent_of_population_identifying_as_nh_white	The percentage of the total population that identified their race as White alone and did not identify their ethnicity as being of Hispanic or Latino origin.
Percent of population identifying as non-Hispanic Black	percent_of_population_identifying_as_nh_black	The percentage of the total population that identified their race as Black or African American alone and did not identify their ethnicity as being of Hispanic or Latino origin.
Percent of population identifying as non-Hispanic Asian/Pacific Islander	percent_of_population_identifying_as_nh_asian	The percentage of the total population that identified their race as Asian or Pacific Islander alone and did not identify their ethnicity as being of Hispanic or Latino origin.
Percent of population identifying as Hispanic	percent_of_population_identifying_as_hispanic	The percentage of the total population that identified their ethnicity as being

		of Hispanic or Latino origin, regardless of racial identity.
Percent of population reporting no checkup in past year	percent_of_population_reporting_no_checkup_in_past_year	The percentage of the total population that has not seen a primary care provider for a routine checkup in the past year.