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## Prenatal Care, Birth Outcomes and Newborn Hospitalization Costs: Patterns Among Hispanics in New Jersey

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**Context:** With the influx of Latin American immigrants to the United States and the relatively high fertility of Hispanic women, the importance of understanding patterns of birth outcomes within the heterogeneous Hispanic community is growing.

**Methods:** Vital statistics data linked with hospital discharge files for single, liveborn infants delivered in New Jersey to state residents in 1989 and 1990 are used to examine the effects of maternal birthplace and Hispanic ethnicity on early initiation of prenatal care, low birth weight, infant mortality and newborn hospital costs. Multivariate analyses control for a range of demographic, economic, behavioral and medical factors.

**Results:** White women of Puerto Rican descent have a significantly higher risk than both non-Hispanic whites and other Hispanic whites of having a low-birth-weight baby. However, their infants do not have an increased risk of mortality, and newborn hospitalization costs are not elevated for this group. Mexican-born white women begin prenatal care later than their U.S.-born counterparts, but do not have worse birth outcomes. The sharpest contrasts are not among Hispanics but between non-Hispanic black and non-Hispanic white women born in the same place.

**Conclusions:** Ethnicity and birthplace affect prenatal care and birth outcomes but are probably not as significant as racial differences. Poor outcomes without elevated newborn costs may indicate less access to high-quality neonatal care among some ethnic groups.

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