Maternity and early years – births

Local picture

In 2013 there were 3,481 live births in Luton, a decrease of 2.7% on the previous year. The number of births by ward varies. As shown in Figure 1, in 2013 Biscot, Dallow and Saints, wards with younger more ethnically diverse populations had the most births compared with less ethnically diverse wards such as Icknield, Bramingham, Stopsley and Limbury.

Figure 1: Live births in Luton (2013)

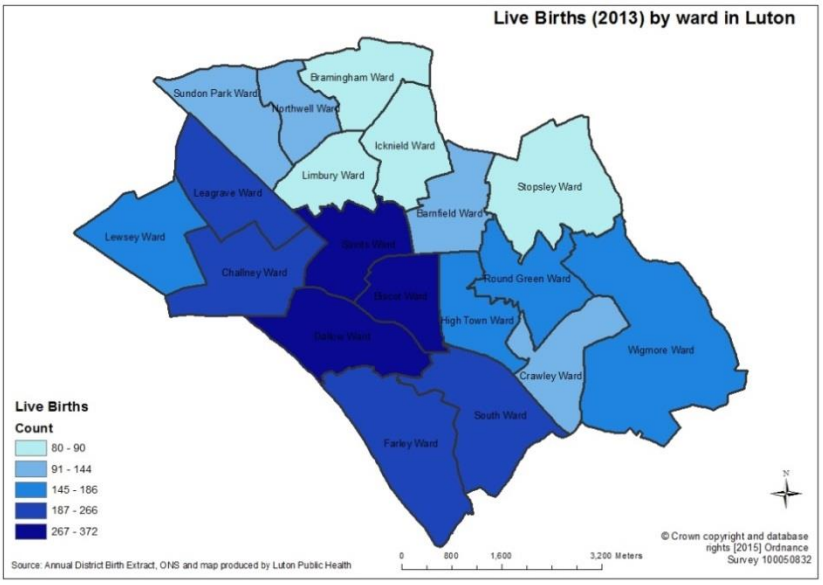


Table 1 shows key birth and fertility data for Luton compared with England and statistical neighbours. In 2013, Luton had the 6th highest general fertility rate (the number of births per 1,000 women of child bearing age) of all local authorities in England increasing from 11th highest in 2009. The wards with the highest fertility rates (per 1,000 females aged 15-44 years) are Biscot, Challney and Dallow all with estimated rates above 85 per 1,000 women. Luton has a higher than average number of children born to each woman compared with England and four of the five statistical neighbour areas.

Table 1: Live births, general and total period fertility rates, 2013

	LUTON	Bradford	Birmingham	Enfield	Slough	England
Number of Live births	3,481	8,039	17,421	4,908	2,601	664,517
General Fertility Rate	76.5	75.1	71.2	69.5	78.7	62.4

Source: ONS

Ethnicity

Ethnicity data is not available in the birth records, and using country of birth of the mother as a crude proxy[1] shows the highest birth rates in Luton are amongst mothers born in Pakistan and Bangladesh with an estimated general fertility rate more than twice that of English born mothers (57.8 per 1000 15-44 year olds). There are also higher estimated rates in mothers born in India, African countries and Eastern Europe compared with English born mothers. Using ethnicity from hospital records for 2011 to 2014 (therefore only including hospital births) shows a similar picture with fertility rates highest in births to mothers of Pakistani ethnicity (79.4 per 1,000), Other White (67.7 per 1,000) and Bangladeshi (65.5 per 1,000) compared with 35.6 per 1,000 in White British mothers.

Low birth weight of term babies (born after 37 weeks gestation)

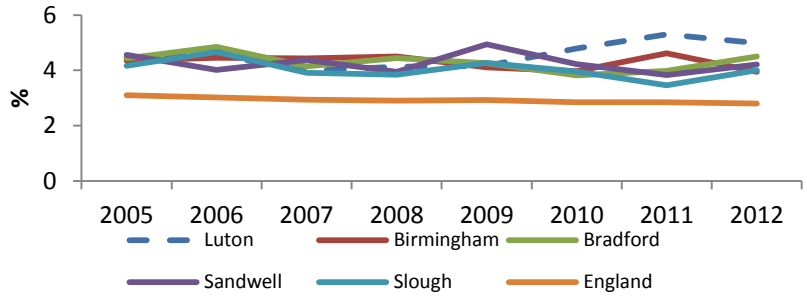
Low birth weight at term is defined as a weight below 2,500g of babies born at 37+ week gestation. Low birth weight is an indicator of population health; low birth weight increases the risk of childhood deaths and disease, developmental problems for the child, and is associated with poorer health in adult life. It is important to distinguish between babies who are born pre-term and have a birth-weight commensurate with their gestational age and babies born at term who are small as a consequence of intra-uterine growth retardation (IUGR). There are a number of variables that can contribute to birth weight:

- Ethnicity - there is strong evidence that south Asian women often give birth to babies with a lower birth-weight.[i]
- Age of the mother - younger mothers may have smaller babies.
- Lifestyle of the mother- high BMI, smoking in pregnancy, misuse of alcohol and drugs can often lead to infants with a lower birth-weight.

[1] Using country of birth and estimated female population aged 15-44 based on Luton wide figures.

There is increasing evidence that recognises that some babies born with a weight below 2,500g are a healthy weight when the physical characteristics of their mother are factored in. The West Midlands Perinatal Institute has developed the GROW (Gestation Related Optimal Weight) project to monitor intra-uterine growth. In 2012, 5% of all babies (163) in Luton (a slight decrease from 5.3% in 2011) were born with a low birth weight. This is the second highest proportion of any area in England, consequently a rate significantly higher than England (2.8%).**Error! Bookmark not defined.** Rates have been consistently declining since 2005 in England (10% decrease) and rates for comparator areas are below that of Luton. Since 2007 there has been a 25% increase in babies born with a low birth weight in Luton (Figure 2).

Figure 2: Low birth weight of term babies, 2005-2012



Source: Public Health Outcomes Framework and Luton PHI

References

[i] Bull J, Mulvihill C and Quigley R. Prevention of low birth weight: assessing the effectiveness of smoking cessation and nutrition interventions. Evidence briefing. London: Health Development Agency, 2003.