

# News From the Centers for Disease Control and Prevention

## Highest Rate of US Home Births in 3 Decades

The rate of home births in the US reached the highest level in 30 years in 2021, according to a National Vital Statistics [report](#).

Birth certificate data showed that home births rose steadily from 1990 to 2019, by an average of about 2% a year. But dramatic increases occurred during the first 2 years of the COVID-19 pandemic. The home birth rate rose 22%, from 1.03% to 1.26%, between 2019 and 2020, and another 12%, to 1.41%, in 2021.

About 2% of births among White women occurred at home in 2021, the highest rate of any racial or ethnic group. But Black and Hispanic women have experienced the largest increase in home birth rates in recent years. Home births among Black women increased 36%, from 0.50% in 2019 to 0.68% in 2020, and 21%, to 0.82%, in 2021. Home births among Hispanic women increased by 30%, from 0.37% of all deliveries in this group in 2019 to 0.48% in 2020, and by another 15%, to 0.55%, in 2021. By comparison, the rate of home births among White women increased 21% from 2019 to 2020 and 10% from 2020 to 2021.

The greatest increase in home births overall took place in January through

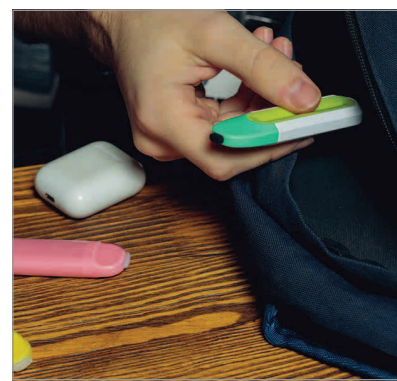
March of 2021 compared with the same months in 2020. By comparison, home birth rates were relatively stable in January and February of 2019 and 2020, which may suggest pandemic-related effects on women's birth location choices. The largest increases in home births between the early months of 2020 and 2021 occurred among Black women, who had a 51% to 62% increase in home births, and Hispanic women, who had a 24% to 69% increase in home births. Home births among White women increased from 24% to 41% across the early months of 2020 to 2021.

Fear of being infected with SARS-CoV-2 or receiving poor care in overwhelmed hospitals may have made women reluctant to deliver in a hospital, wrote the authors of a second [study](#). The study, by researchers from the University of Maryland in College Park and Boston University School of Public Health, found a 23% increase in planned home births and a 13% increase in birth center deliveries between 2019 and 2020. About 1 in 50 US births in 2020 occurred in one of these non-hospital settings, the study found.

## Tobacco Use Remains High in Middle and High Schools

Nearly 1 in 9 US middle and high school students reported tobacco product use

in the past 30 days—most commonly e-cigarettes—according to a CDC and US Food and Drug Administration [analysis](#) of data from the 2022 National Youth Tobacco Survey (NYTS). The researchers estimated that approximately 3.08 million students in 6th to 12th grade currently use tobacco products.



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The survey of 28 291 middle and high school students conducted between mid-January and May of this year at 341 schools across the country suggests the tobacco product use remains high among US youth despite the health risks. The data show that 16.5% of high school students and 4.5% of middle school students reported using a tobacco product in the past 30 days. About 14% of high school students and about 3% of middle school students used electronic cigarettes. Nearly 4% of all those surveyed reported using any combustible tobacco product.

Several subgroups of students reported even higher rates of tobacco product use. About 16% of students who identified as lesbian, gay, bisexual, or transgender reported current use of these products. The 2022 NYTS survey was the first to provide data on tobacco product use among American Indian or Alaska Native, Asian, multiracial, or Native Hawaiian or other Pacific Islander youths. It found that American Indian or Alaska Native youth reported the highest rate of a tobacco product use of any racial or ethnic group, at 13.5%.



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The report also found a link between social determinants of health and tobacco product use. For example, students who had experienced severe psychological distress or were from less affluent households were more likely to report current tobacco product use. More than a quarter of students with low academic achievement reported current use. The authors suggested that greater targeting of tobacco product ads to these groups or higher density of outlets selling tobacco products in

some communities and other systemic factors likely cause these disparities.

"Continued surveillance, sustained implementation of population-based tobacco control strategies, and efforts to address disparities, combined with the Food and Drug Administration's regulation are warranted to prevent and reduce youth tobacco use," the authors wrote.

They highlighted ongoing state and local efforts to enforce age-based restrictions on sales, ban the sale of flavored

tobacco products and the indoor use of tobacco products, and raise prices and public awareness. But they noted that federal regulation might be necessary, and that efforts to address social and structural determinants of health that fuel health disparities, including increased tobacco product use, are also needed.

– **Bridget M. Kuehn, MSJ**

**Note:** Source references are available through embedded hyperlinks in the article text online.