Birth Outcomes Among Descendants of Foreign-Born and US-Born Women in California: Variation by Race and Ethnicity

Theresa Andrasfay
Office of Population Research | Princeton University

Summary

• Using California birth records from 1978-2015, I link records of infants to those of their mothers to compare low birthweight and preterm birth between descendants of foreign-born and US-born grandmothers in two generations.
• An initial foreign-born advantage in birth outcomes is present among most racial/ethnic groups, but not all.
• In the subsequent generation, the foreign-origin advantage diminishes for most groups and a foreign-origin disadvantage in low birthweight emerges for descendants of Asian women, driven by descendants of Asian Indian, Cambodian, and Filipino women.

Introduction

Adverse birth outcomes, including low birthweight and preterm birth, are not only powerful predictors of morbidity and mortality within the first year of life, but also predict a multitude of health outcomes later in life. Like most health outcomes, these adverse birth outcomes vary by race and ethnicity in the United States.

A foreign-born advantage among Hispanics is well-documented, but other immigrant groups, namely black, Asian, and Hawaiian/Pacific Islander immigrants, have received less attention. Furthermore, it is unclear whether a foreign-origin advantage in these outcomes persists across generations for all racial/ethnic groups.

This chapter, I compare the prevalence of low birthweight and preterm birth between descendants of foreign-born and US-born grandmothers in two generations by the race/ethnicity of the grandmother. This study also disaggregates the analyses by Asian subgroups to uncover disparities that arise from the heterogeneity in immigrant experiences and socioeconomic profiles present among these subgroups.

Data and Methods

Data are from 1978-2015 birth records from California, which has the largest immigrant population in the U.S. and is home to immigrants from a diverse set of origin countries. I linked records of female infants born between 1978 and 1995 to birth records of infants born between 1989 and 2015 to create an intergenerational sample. The analysis consists of descriptive statistics of the birth outcomes by race/ethnicity and foreign-origin for both generations and multivariate models predicting these outcomes to assess whether the descriptive findings in both generations persist after adjustment.

Conclusions

An initial foreign-born advantage in birth outcomes is present among most racial/ethnic groups, but not all. Asians as a whole exhibit no foreign-born advantage in low birthweight but a foreign-born disadvantage in preterm birth, and there is substantial heterogeneity within this population. In the subsequent generation, the foreign-origin advantage diminishes for most groups and a foreign-origin disadvantage in low birthweight emerges for descendants of Asian women, driven by descendants of Asian Indian, Cambodian, and Filipino women. These findings largely persist after adjustment for sociodemographic and healthcare-related characteristics in both generations. These results underscore the importance of disaggregating race/ethnicity when possible to better understand health disparities in the population.

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Contact Information

• Email: theresaa@alumni.princeton.edu