On the international level, the National Center for Health Statistics (NCHS) seeks to improve the availability and quality of data through cooperative projects and collaborative research.

Among the Center's international efforts are

- a workshop in early 1990 to create a high-level international forum in health statistics
- 20 current major international projects covering infant mortality, aging, health survey development, and other major topics.

Collaborative Research Workshop

Together with representatives of Canada, England, and Wales, NCHS will hold a planning workshop in early 1990 to provide a foundation and mechanism for international collaborative research on high priority health issues.

The workshop will provide a forum for supporting international health statistics programs; evaluating the utility of various statistical programs; and recommending their improvement, continuation, adoption, or cancellation. The workshop is expected to establish mechanisms for carrying out comparative international research on priority health issues, such as infant mortality, improving the comparability of data, standardizing measurement techniques, and exchanging health information management technology.

Discussion topics include benefits of international collaborative activities, areas of possible future study, and strategies for carrying out collaborative activities. Working groups will be established and researchers identified to carry out selected projects.

Health Data Reference Guide

In 1983, NCHS began the International Health Data Reference Guide, a biennial guide to selected national, vital, hospital, health manpower, and population-based health survey statistics. The first edition included information on 16 industrialized countries. Coverage was extended to 25 nations in 1985, and to 30 reporting areas in 1987. The next edition will be published in January 1990 and will present updated information from each participating country. Discussions are underway to add other countries.

The guide is distributed without charge by NCHS to facilitate identifying sources and acquiring data for international research and analytical projects.

International Collaborative Efforts (ICE)

In International Collaborative Efforts (ICE), experts of different nations, facing similar situations and challenges, discuss approaches and perspectives, and exchange insights on health topics. Research findings will be applied to NCHS programs to strengthen data collection, analysis, and dissemination. ICE researches meet periodically to select collaborative research topics that can be carried out with existing or readily available data. Special working groups will analyze data on selected topics. At present, NCHS is engaged in projects on perinatal and infant mortality, and health care of the elderly and their health.

ICE on perinatal and infant mortality. Factors responsible for relatively high perinatal and infant mortality rates in the United States, compared with other industrialized countries, will be examined. A collaborative, multinational approach is intended to provide information from countries that have successfully reduced perinatal and infant mortality, have unique or high quality data gathering systems, or that are experiencing problems similar to those in the United States in reducing perinatal and infant mortality.

Collaborating in the effort are Denmark, England and Wales, Federal Republic of Germany, Israel, Japan, Norway, Scotland, Sweden, and the United States. Collaborating in the U.S. effort are Centers for Disease Control's NCHS and Center for Chronic Disease Prevention and Health Promotion, the Health Resources and Services Administration, the National Institute of Child Health and Human Development, and the Association for Vital Records and Health Statistics.

ICE has sponsored an international symposium, published proceedings, and conducted research on specific factors associated with infant mortality and birth weight problems. An important achievement is the creation of a standard data base for research on infant mortality. The data base covers births; late fetal deaths; and early neonatal, late neonatal, and infant deaths, by plurality in the period 1973–83, for participating nations and six States of the United States.

A classification scheme for infant deaths by major cause of death categories was developed and is being used in ICE analytical projects. A new data set will include age at death, cause of death, and length of gestation, in addition to the variables in the other data set. A final ICE symposium is being planned for the Spring of 1990, at which recommendations for future action will be outlined.

Health care of the aging. The ICE on Aging focuses international efforts on technical and methodological issues in providing data on the health of the aged and their care. The effort is intended to provide opportunities for comparing and linking health data on aging among nations and to improve measurements of the health of older persons.

Australia, Canada, Hong Kong, Hungary, Italy, Israel, the Netherlands, and the United States are members of the ICE on Aging. Collaborators are the Centers for Disease Control; National Heart, Lung, and Blood Institute, National Institute on Aging, National Institute of Mental Health; Health Care Financing Administration, and the World Health Organization.

Measurement projects in six areas are now being implemented. They are in health promotion behaviors, comparative analysis for selected diseases common in older persons, hip fracture, quality of life, outcomes of nursing home care, and functioning. An international symposium in 1991 is planned to report on progress. Final results are expected in 1993.
International data bank. NCHS is developing an international health statistics data base to support and complement the ICES, and to provide the basis for other comparative research. A documented data base consisting of infant and fetal mortality data files since 1945 for about 30 countries is in place. A mortality data base is being developed to include cause-specific mortality by age and sex.

Survey of Pakistan. The Pakistan National Health Survey provides technical assistance to Pakistan in planning, designing, and implementing a national health examination survey. The survey will provide data on the health status of the population and on patterns of disease for use in developing health policies and programs.

A survey team of NCHS staff is working with the Pakistan Medical Research Council. Agreement has been reached on a sample frame and stratification to produce State estimates for Punjab and for the Nation.

Household questionnaires and examination protocols were developed, tested in two pretests, and revised for the field work of the full survey, which began in May 1989. Work will continue on modifying field procedures. The survey is to be completed in 5 years, by 1994.

Automation used in the Center's National Health and Nutrition Examination Survey provided the groundwork for a computerized receipt and control system installed for the Pakistan survey.

Mexican American low birth weight study. Low birth weight is the single most critical factor associated with infant mortality in the United States. The purpose of the project is to improve the understanding of differences in birth weight in the United States, compared with other countries. In particular, the study will attempt to assess the effect of ethnicity and life style on birth weight, by comparing the performance of a specific ethnic group in the United States with the performance of the same population in the country of origin.

Of the various racial and ethnic groups, Mexican Americans were chosen because of growing interest in their excellent birth weight performance despite their overall low socioeconomic status. Data on Mexican births have been obtained from a multiple hospital study of prenatal medical care in the Mexico City area, conducted by the Center for Public Health Research of the Mexican Ministry of Public Health.

The study provides basic information on 32,000 deliveries, and more detailed data on 4,000 cases and controls. Information on Mexican American deliveries is from several sources, including vital statistics data from the southwestern United States, and clinical studies of Mexican American births containing a level of detail similar to the Mexico City study. A comparison of birth weight distribution curves, including an adjustment for altitude, has been prepared and the final report is expected within the year.

Other projects. International projects have been conducted with researchers in India on iron deficiency anemia and on child growth and development standards. A long-term project provided assistance in developing a health survey in Egypt. A project is underway to develop a health interview survey in Portugal. A study of cesarean births in the United States and Norway during a 15-year period may help explain differing delivery patterns present in both countries. A Japan-United States Cooperative Program in Health Statistics is exchanging methodology, research, and data. A long-standing international activity of NCHS is work on the international classification of mortality and morbidity. NCHS is the World Health Organization's collaborating center for classification of diseases for North America.

The international health statistics programs of NCHS consist of cooperative ventures and collaborative research on analytical and methodological issues, as well as international meetings and symposia, scientific articles and presentations, and technical assistance and consultation. Information on the projects and the international program is available from the NCHS Office of Planning and Extramural Programs, International Statistics Staff, tel. (301) 436-7039.

1987 Final Natality Statistics


- The 3,809,394 births in the United States in 1987 were 1 percent more than in 1986, and the highest annual total since 1964. The fertility rate of 65.7 births per 1,000 women aged 15–44 remains essentially unchanged since 1983, but is 37 percent below the 1964 level. The 1987 increase in births reflect the growth of the female population of childbearing age.
- Mothers older than 30 years accounted for 27 percent of total births in 1987, the highest percentage observed for this age group in almost 3 decades.
- Low birth weights (less than 1,500 grams) as a percentage of all births increased from 6.8 percent in 1986 to 6.9 percent in 1987, equaling 1979. Prior to 1979, the percentage of low birth weight infants decreased steadily.
- The racial differential in low birth weight remained stable, with increases during the previous year reported for both black and white infants in 1987. The percentage of black low birth weight infants rose from 12.5 in 1986 to 12.7 in 1987. The percentage for white low birth weight infants increased from 5.6 to 5.7.
- Pre-term births, or infants born prior to 37 complete weeks of gestation, increased to 10.2 percent of all births in 1987, up from 10.0 percent in 1986. This marks the fifth nearly consecutive year of increase in the proportion of pre-term infants.
- The proportion of pre-term infants increased from 8.4 to 8.5 percent for whites and from 17.7 to 18.0 percent for blacks from 1986 to 1987.
- One in four births in 1987 was to an unmarried mother. The incidence of childbearing by unmarried women continued to rise in 1987, with the number of babies born to unmarried women in that year being 40 percent greater than at the beginning of the decade.
- There were 68,532 Asian births in 1987, an increase of 11 percent over 1986 and the largest single-year increase in this racial category since 1982.

The report presents data on prenatal care, births to unmarried women, Hispanic births, and Asian births. Copies and information are available from the NCHS Scientific and Technical Information Branch, 3700 East-West Highway, Hyattsville, MD 20782; tel. (301) 436-8500.

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