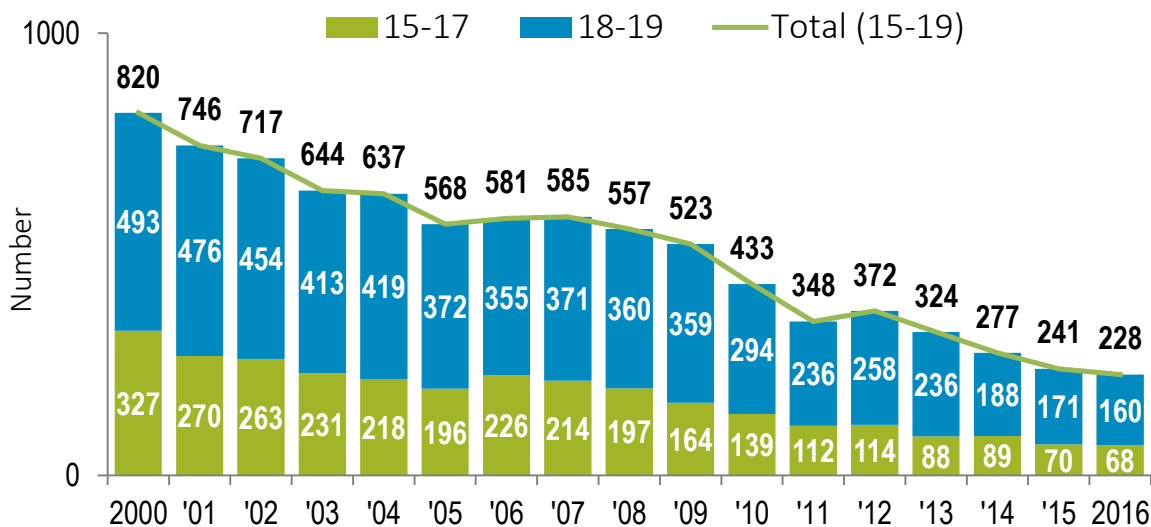


The number of births to teen mothers in Minneapolis continues to decrease. From 2000 to 2016, the annual number of births to teen mothers, ages 15-19 years, decreased from 820 births to **228 births**, or approximately -72% (Figure 1). Over the more recent five-year period of 2012 to 2016, the percent decrease was -39%.

**Figure 1. Number of births to teen mothers (ages 15-19 years), Minneapolis, 2000-2016**



Source: Minnesota vital records

Decreases in the number of births to teen mothers have been seen across racial/ethnic subgroups (Table 1). During the ten-year period of 2007-2016 and the more recent five-year period of 2012-2016, all racial/ethnic subgroups experienced substantial percent decreases. However, Asian teens experienced the greatest change, with ten- and five year percent decreases exceeding 80%. In 2016, this resulted in single digits births among Asian teens.

The decrease in the number of births cannot be attributed to an increase in abortions. The number of abortions to teen mothers has decreased overall and within every racial/ethnic subgroup.

**Table 1. Number and percent change of births to teen mothers (ages 15-19 years), by race/ethnicity, Minneapolis, 2007-2016**

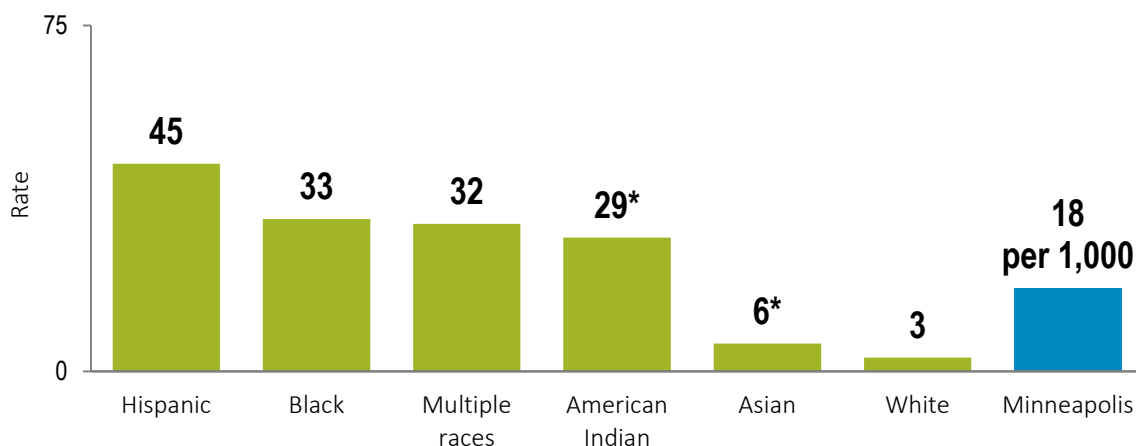
Race/ethnicity	2007	2012	2016	Percent change, 10-year (2007-2016)	Percent change, 5-year (2012-2016)
American Indian	42	17	9	-79%	-47%
Asian	45	38	7	-84%	-82%
Black	280	151	104	-63%	-31%
Hispanic	127	92	64	-50%	-30%
Multiple races	42	40	24	-43%	-40%
White	42	29	20	-52%	-31%

Source: Minnesota vital records

Racial/ethnic subgroups are mutually exclusive. American Indian, Asian, black, multiple races, and white subgroups are of non-Hispanic ethnicity.

Despite the declining trend, there is still prevention work to be done—especially towards achieving health equity. In 2016, the birth rate among teen mothers in Minneapolis was approximately 18 births per 1,000 females ages 15-19 years; it was higher in populations of color (Figure 2). Among those of Hispanic race/ethnicity, the rate was approximately 45 per 1,000; black, 33 per 1,000; multiple races, 32 per 1,000; American Indian, 29 per 1,000\*; Asian, 6 per 1,000\*; and white, 3 per 1,000. In other words, the birth rate for Hispanic teen mothers was approximately 15 times higher than the rate for whites; the birth rates for American Indian, black, and multiple race teen mothers were each between 10-11 times higher than the rate for whites.

**Figure 2. Teen birth rate (per 1,000 females ages 15-19 years), by race/ethnicity, Minneapolis, 2016**



Sources: Minnesota vital records (births); US Census 2010 (population)

\* Rates based on fewer than 20 births annually are unstable and prone to change from year-to-year.

Racial/ethnic subgroups are mutually exclusive. American Indian, Asian, black, multiple races, and white subgroups are of non-Hispanic ethnicity. Rates are calculated using the Census 2010 population estimates for females ages 15-19 by racial/ethnic subgroup in Minneapolis, MN.

The number of births to teen mothers who have previously given birth, commonly known as “repeat teen births,” has declined over time, from 443 during the three-year period of 2002-2004 to 116 during the most recent three-year period of 2014-2016. 18-19 year olds make up the majority of repeat teen births (100 of 116, or 86%, during the period 2014-2016). Repeat teen births have historically accounted for approximately one in every five births to teen mothers; however, during the most recent three-year period of 2014-2016, repeat teen births made up a smaller proportion of 16% of all teen births.

**Table 2. Number and percentage of births to teen mothers (ages 15-19 years) who had previously given birth (“repeat teen births”), Minneapolis, 2002-2016**

	2002-04	2005-07	2008-10	2011-13	2014-16
Repeat teen births over three years	443	350	315	214	116
Percentage of repeat teen births to all teen births	22.3%	20.2%	20.9%	20.7%	15.6%

## Conclusion

Minneapolis continues to make progress towards reducing the number of births to teen mothers, but racial and ethnic disparities persist. The Minneapolis Health Department collaborates with the broader community of stakeholders, including clinical providers, families, teachers and school staff to reduce births to teen mothers. Minneapolis School Based Clinics provide teens with easy access to contraception and sexual health education. For more information, visit:

[www.minneapolismn.gov/health/youth/schoolclinics](http://www.minneapolismn.gov/health/youth/schoolclinics).

## Alternative formats

For reasonable accommodations or alternative formats please contact the Minneapolis Health Department at 612-673-2301 or email [health@minneapolismn.gov](mailto:health@minneapolismn.gov).

People who are deaf or hard of hearing can use a relay service to call 311 at 612-673-3000.

TTY users can call 612-673-2157 or 612-673-2626.

Para asistencia 612-673-2700, Yog xav tau kev pab, hu 612-673-2800, Hadio aad Caawimaad u baahantahay 612-673-3500.

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