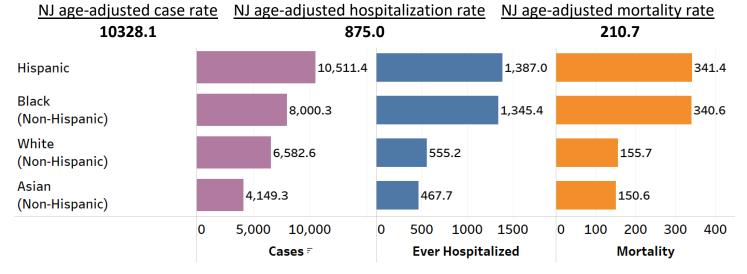
# All data are preliminary and subject to change

Age-adjusted laboratory confirmed case, hospitalization, and mortality rates by race/ethnicity as of *August 19, 2021*, New Jersey



Age-adjusted laboratory confirmed case, hospitalization, and mortality rates by race/ethnicity per 100,000:

	Race/Ethnicity	Cases	Ever Hospitalized	Mortality
Age-adjusted rate per 100,000	White	6582.6	555.2	155.7
	Black	8000.3	1345.4	340.6
	Hispanic	10511.4	1387.0	341.4
	Asian	4149.3	467.7	150.6
Crude rate per 100,000	White	6601.0	790.1	265.3
	Black	8142.1	1407.3	343.8
	Hispanic	10231.8	1166.5	242.4
	Asian	4262.9	464.6	131.7
Case counts	White	322979	38657	12980
	Black	93646	16186	3954
	Hispanic	188200	21456	4459
	Asian	37223	4057	1150
Case counts (%)	White	42.2%	44.3%	54.9%
	Black	12.2%	18.6%	16.7%
	Hispanic	24.6%	24.6%	18.9%
	Asian	4.9%	4.7%	4.9%
	Total cases (N)	765307	87168	23628
Total laboratory- confirmed cases:	Percent of total records			
930,076	with age and	82.3%	95.0%	98.5%
<b>Total hospitalized cases:</b> 91,711	race/ethnicity data	<del></del>		2 3.3.1
Total deaths: 24,000				

### Notes

- This report includes PCR positive records (cases, hospitalized and mortality) with known race/ethnicity and age information.
- Data are obtained from Communicable Disease Reporting and Surveillance System (CDRSS).
- COVID-19 associated deaths are identified through public health investigations (i.e., Disease Surveillance) and NJDOH's vital statistics system.
- Hospitalization data have been collected through public health investigations.
- Age-adjusted rates on cases who identify as American Indian/Alaska Native and Native Hawaiian/Pacific Islander, or Other race categories were excluded. Hispanic/Latino includes people of any race; White, Black, Asian and Other exclude Hispanic ethnicity.
- Confirmed case rates include cases who died, case and mortality data are not mutually exclusive.
- Age is standardized using U.S. 2000 standard population, source: https://www-doh.state.nj.us/doh-shad/home/AARate.html
- Crude rates are calculated using 2018 NJ population estimates obtained from NJ Department of Labor.



#### What is age-adjusted rate?

One way of examining the pattern of diseases in communities of different age groups is to calculate crude rates, which are the number of cases or deaths divided by the size of the population. Age-adjusting is a way to make fairer comparisons between groups with different age distributions. For example, a county with a higher percentage of elderly people is expected to have a higher crude (unadjusted) death rate than a county with a younger population. Therefore, it is often important to control for differences among the age distributions of populations when making comparisons among rates to assess the risk. Age-adjustment is a statistical method to remove differences caused by different age distributions, so that the rates are based on the same age structure.

## What are the findings from this report?

In New Jersey, based on 2018 population estimates, Black and Hispanic racial and ethnic groups have younger populations than the White racial group. After age-adjusting using a standard population, the case and mortality rates for the White racial group decreased while rates increased for the Hispanic ethnic group. The age-adjusted case rate among the Black racial group decreased slightly and the mortality rate was unchanged. The age-adjusted hospitalization rate increased among the Hispanic ethnic group and decreased for the White and Black racial groups.

#### Resources

- Age-adjusted Death Rate. New Jersey Department of Health, New Jersey State Health Assessment Data website: https://www-doh.state.nj.us/dohshad/home/AARate.html#:~:text=An%20age%2Dadjusted%20rate%20is,have%20on%20health%20event%20 rates.
- Age-adjustment. National Institutes of Health: https://www.nlm.nih.gov/nichsr/stats\_tutorial/section2/mod5\_age.html