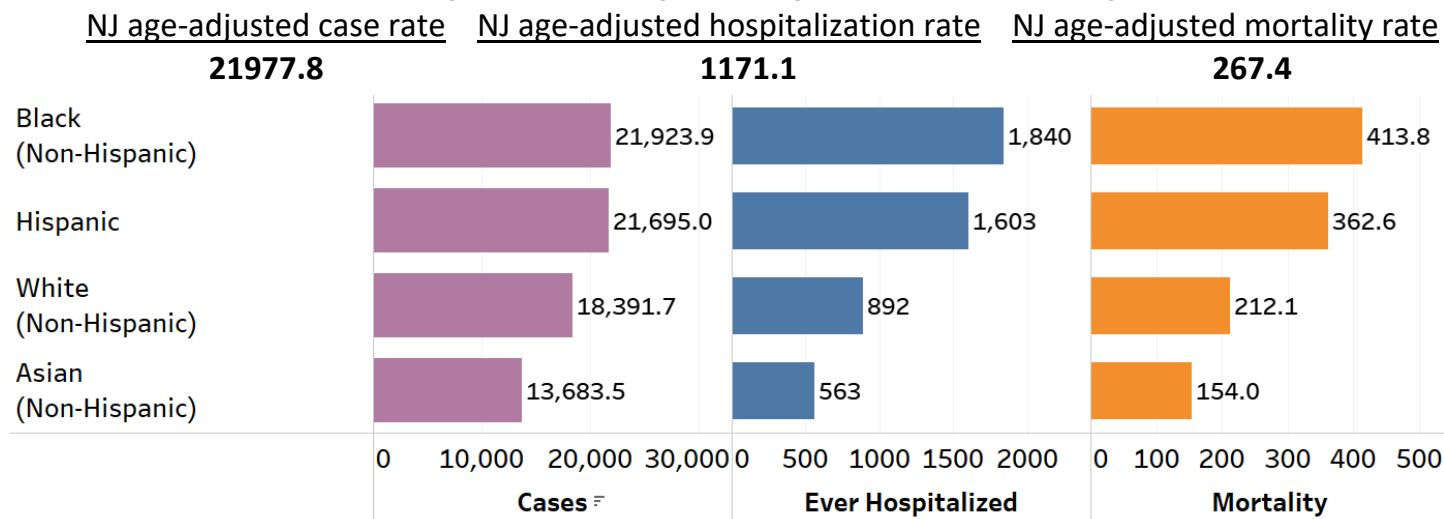All data are preliminary and subject to change

Age-adjusted laboratory confirmed case, hospitalization, and mortality rates by race/ethnicity as of *July 26, 2022*, New Jersey

NJ age-adjusted case rate	NJ age-adjusted hospitalization rate	NJ age-adjusted mortality rate
21977.8	**1171.1**	**267.4**

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	18391.7	891.5	212.1
	Black	21923.9	1840.0	413.8
	Hispanic	21695.0	1603.4	362.6
	Asian	13683.5	563.1	154.0
Crude rate per 100,000	White	17681.2	1273.3	366.3
	Black	21922.8	1956.4	436.1
	Hispanic	21625.9	1401.7	274.8
	Asian	13725.3	579.2	147.8
Case counts	White	849293	61159	17597
	Black	252747	22555	5028
	Hispanic	405411	26277	5151
	Asian	122310	5161	1317
Case counts (%)	White	43.8%	49.2%	57.3%
	Black	13.0%	18.2%	16.4%
	Hispanic	20.9%	21.1%	16.8%
	Asian	6.3%	4.2%	4.3%
	Total cases (N)	1940357	124258	30719
Total laboratory-confirmed cases: 2,195,034 **Total hospitalized cases:** 128,216 **Total deaths:** 31,146	**Percent of total records with age and race/ethnicity data**	88.4%	96.9%	98.6%

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

1. Age-adjusted Death Rate. New Jersey Department of Health, New Jersey State Health Assessment Data website: https://www-doh.state.nj.us/doh-shad/home/AARate.html#:~:text=An%20age%2Dadjusted%20rate%20is,have%20on%20health%20event%20rates.

2. Age-adjustment. National Institutes of Health:

   https://www.nlm.nih.gov/nichsr/stats_tutorial/section2/mod5_age.html