

THE STATUS OF WOMEN IN NEW ORLEANS 2024



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Forward

New Orleans is a vibrant tapestry woven together by the resilience and spirit of its people. At the heart of this tapestry are women, who shape our families, our workforce, and our civic life. The Junior League of New Orleans has been integral to lifting up women in this tapestry for a century. This report, "Status of Women in New Orleans - 2024," commissioned by the Junior League and completed in partnership with the Newcomb Institute at Tulane University, the Mary Amelia Center for Women's Health Equity Research, and the Connelly Alexander Institute for Data Science is an important gift to our community to offer a comprehensive overview of the current state of women in New Orleans across various dimensions, including demographics, economics, health, crime, politics, and climate. Importantly, it can help us develop data-driven programs and policies that will help inspire solutions to ongoing challenges.

We have made progress and we should celebrate. For example, the proportion of women with bachelor's degrees has nearly doubled since 2000; women hold 44% of elected seats in New Orleans, with Black women holding the majority of those seats; we are seeing declining rates of violent crime and discriminatory policy; New Orleans has better access to primary care and mental health providers than the state or national average; and teen birth and infant mortality rates have declined, likely due to improved healthcare access and education.

However, significant challenges remain, particularly for women of color and low-income families. The report consistently highlights significant health disparities in various socioeconomic dimensions, including by race and ethnicity, partially related to access to care. We can also see persistent economic challenges including gender wage gap and the high cost of housing relative to income disproportionately affecting women, particularly those heading households. The report highlights the alarming increase in femicides, particularly those involving firearms and tells us that Black women are disproportionately affected by this form of violence.

This report is more than just a collection of statistics; it holds the story of resilience, progress, and persistent challenges for the women of New Orleans. It's a story of women who are the backbone of our communities, who are making strides in education and the workforce, and who are increasingly taking their rightful place in the halls of power. It is also a story of women who are being left behind, who are struggling to make ends meet, who are facing disproportionate health risks, and who are bearing the brunt of violence and climate change.

Most importantly, this report is a call to action for the public and private sector to build data driven policies and programs to address these challenges. The community will need to make investments in childcare, economic opportunity, and climate resilience. It's a call to address the systemic inequities that are holding women back, to invest in the health and well-being of our mothers and children.

New Orleans is at its best when it comes together to create innovative and collaborative approaches to address shared challenges. We have seen our success time and again, including in those early years following the devastation Hurricane Katrina. Let's use this report as a catalyst for change. One that let's channel our collective energy and expertise into building a brighter future for women in New Orleans to create a city where every woman has the opportunity to thrive.

Karen Bollinger DeSalvo, MD, MPH, MSc

Former Health Commissioner, City of New Orleans 2011-2014

EXECUTIVE SUMMARY

In honor of their 100 years of service to the Greater New Orleans community, the Junior League of New Orleans commissioned a report on the status of women. The Junior League of New Orleans sought to provide a snapshot on women's lives today and how things have improved, stagnated, or declined over time via analysis of data on the following dimensions: Demographics, Economic Status, Health Status, Crime and Gender-based Violence, Political Representation, and Climate. The Junior League of New Orleans collaborated with the Newcomb Institute at Tulane University to commission and develop this report, which builds from a prior report they led in 2016 focused on the Status of Women in New Orleans 10 years post-Katrina.

Newcomb Institute at Tulane University is an academic institute focused on gender equity research and training. The Institute led the development of this report, using publicly available demographic data from the US Census, health data from the Louisiana Department of Health and the Centers for Disease Control and Prevention, crime data from the New Orleans Police Department and the Federal Bureau of Investigation, and political representation data from Orleans Parish. Where possible, data are presented with breakdowns on race/ethnicity and age. The Mary Amelia Center for Women's Health Equity Research supported data mining and interpretation of findings. The Connolly Alexander Institute for Data Science developed data visualizations. Both organizations are also part of Tulane University. This collaboration brought trained experts from public health and demography, data sciences, and gender equity together to generate this work. The report considers findings from the most recently available data (2022/2023) and trends over periods up to 15 years.

KEY FINDINGS:

Demographics:

Population Size: The population size is 376,971, making New Orleans the largest city in the state. However, there is an almost 4% population decline since 2020.

Gender: Gender make-up of the population has remained stable over time, with women comprising a slight majority over men. Women are 52.8% of the New Orleans population.

Race/Ethnicity: As with the state as a whole, the majority of women in New Orleans are Black (57.7%); 29.8% of women are White, and 5.5% are Hispanic/Latina. Our highest growth in population by race/ethnicity is seen in our Hispanic community.

Age: New Orleans is an aging city. For example, among Black women, the percentage of the population under age 18 years was 23.9% in 2010 and 19.1% in 2022; the percentage of this population aged 65+ was 11.9% in 2010 and 20.0% in 2022. Similar trends are seen for Black men as well as White men and women. However, we have a growing young Hispanic population. Among Hispanic women, the percentage of the population under age 18 years was 22.1% in 2010 and 27.3% in 2022; the percentage of this population aged 65+ was 9.2% in 2010 and 10.7% in 2022.

Education and Economics

Education: While there is a slightly lower high school graduation rate than that seen for the state as a whole, New Orleans also has a higher rate of college entry from high school graduates compared to the state. Completion of college doubled in New Orleans from 2000 to 2021, from 23% to 43% for women and 22% to 40% for men.

Household Income: Household incomes and the median income of both men and women have increased since 2010. Nonetheless, Black women are the lowest earning demographic, which is notable despite comprising 57% of the total women in New Orleans.

Poverty: There is no significant reduction in poverty levels, leaving 1 in 4 women living in poverty, and this statistic is skewed towards Black and Hispanic households. A particular demographic of concern are families headed by Hispanic women, which see increasing levels of poverty since 2014.

Unemployment: Unemployment rates have declined since 2010. The unemployment rate in 2022 is 6.5% among men and 6.9% among women (vs over 13% in 2010).

Gender Wage Gaps: While there is a reduction in the gender wage gap, the wage gap persists—women earn only 86% of what men earn in a similar job.

Childcare Availability and Costs: Childcare costs have increased and comprise a greater percent of the household income than what was seen historically. For infants, these costs have increased from 15% of the household income in 2005 to 20% of the household income in 2017.

Housing

Home Ownership Costs: Home prices are high relative to income, and gender and racial/ethnic disparities persist in homeownership. Only 15% of women-headed households owned a home.

Rental Costs: Data from 2022 shows that the median gross rent is 36% of the total income for families; these data are not available by gender of the head of household.

Unhoused/Homelessness: There is a decline in the population experiencing homelessness or unhoused since 2007 but a slight uptick between 2021 and 2022. Women are less likely than men to be unhoused, but more likely to be unhoused with children.

Health

Access to Care: New Orleans has improved access to both primary care providers and mental health providers since 2014. In 2022, there is a primary care provider for every 910 people, and 1 mental health provider for every 492 people. Access to care in New Orleans remains higher than that seen in the state or nationally, likely because of our many teaching hospitals.

Life Expectancy and Leading Causes of Death: The leading cause of death for women is heart disease, and deaths due to heart disease are on the rise. Unintentional injury has increased as a leading cause of death for women over time. Racial/ethnic health disparities persist.

Sexually Transmitted Infections (STIs): STIs are increasing in New Orleans, with a particularly notable increase in syphilis. Hispanic and Black women have higher rates of STI compared to White women—the chlamydia rate is 4 times higher for Black women, and 2 times higher for Hispanic women, than for White women.

HIV/AIDS: HIV prevalence has remained largely consistent among women across race/ethnicity from 2019 to 2022. However, we have seen an 11% decline in new HIV cases for the state over the past five years up to 2023. Higher prevalence of HIV/AIDS persists for Black residents.

Teen Birth rate: While teen births in the city have declined, the teen birth rate remains higher for Black and Hispanic populations (28 and 70 births per 1000 girls, respectively) than White populations (3 births per 1000 girls).

Prenatal Care and Infant Mortality: Prenatal care rates are comparable for Black and White mothers, but Black infant mortality rates remain higher than White infant mortality rates (9 per 1000 births compared with 3 per 1000 births).

Gender-based Violent Crime and Policing of Women

Rape: Rape crimes have declined in New Orleans but remain high at 119 per 100,000 people.

Intimate Partner Violence (IPV): We lack population estimates of IPV at the parish level. In Louisiana, more than half of all women (55%) have experienced IPV; 21% have been choked or suffocated by a partner, and 6% had a knife or gun used against them. FBI Crime data indicate a decline in IPV homicides, but Louisiana maintains an overrepresentation of IPV-related violent crimes among total violent crimes in 2022 compared to the US as a whole (22% vs 17%).

Policing: Rates of Stop and Search have declined in New Orleans but still disproportionately affect Black people, with 72% of these cases involving Stop and Search of a Black person.

Women's Political Representation

Women hold 44% of the elected seats in New Orleans; 64.2% of these seats are held by Black women. This is in stark contrast to the state as whole, where we find underrepresentation of women and racial/ethnic minorities among elected officials.

SUMMARY AND IMPLICATIONS

New Orleans is strengthening with regard to higher education, health care access, and women's political representation, but our population is aging and rapidly declining in size. The city will not benefit from educational gains if this decline continues. Black and Hispanic communities face key economic and health inequities—despite increases in Black women's political leadership and a growing working age Hispanic

population. Additionally, while this report focuses on women, we find that Black men are being left behind in educational improvements. Strengthening the city will require greater attention and support for racial/ethnic minoritized communities. These communities not only face greater economic constraints, but they are also more likely to include mothers and young children. Access to affordable, high-quality childcare must be prioritized to strengthen women's financial security and to support child development, as well as for economic stabilization for the city. We must bolster the economy and improve job opportunities for the growing college-educated population, or they will be lost to other cities and states.

Climate concerns are also a major issue for the city, both heat and precipitation, with extreme precipitation events increasing in frequency and intensity. New Orleans and outlying regions must remain prepared to ensure that all communities are supported now and in the face of future environmental or other crises. New Orleans continues to be vital, but economic as well as social and healthcare investments are needed to foster strength and growth. Such investments should prioritize women and inward migration to build the city for the coming generations.

BACKGROUND

In honor of their 100 years of service to the community in Greater New Orleans, the Junior League of New Orleans (JLNO) commissioned a report on the status of women in New Orleans. JLNO sought to provide a snapshot on women's lives today and how things have improved, stagnated, or declined post-Katrina and post-COVID via analysis of data on the following dimensions: Demographics, Economic Status, Health Status, Crime and Gender-based Violence, Political Representation, and Climate. The Junior League of New Orleans collaborated with the Newcomb Institute at Tulane University to commission and develop this report, which builds from a prior report in 2016 focused on the Status of Women in New Orleans 10 years post-Katrina, published by Tulane University.

In 2016, Newcomb Institute released a report on the status of women in New Orleans 10 years after Hurricane Katrina (Holman & Schwanz, 2016). This report offered key insights into the unique socio-economic needs of women that remain a concern for the city, and findings were used to advocate for policy solutions to address these concerns. In honor of the 100th anniversary of the Junior League of New Orleans, they have commissioned the Newcomb Institute of Tulane to lead a report on the status of women, approximately 10 years after the last report and in the wake of the severe socio-economic and health impacts caused by the COVID-19 pandemic.

As seen nationally and globally, shocks like climate disasters (e.g., hurricanes, fires) and pandemics exacerbate economic strain, mental health concerns, violence against women, and gun violence (DeRigne. & Benevolenza, 2019). New Orleans is vulnerable to these same concerns, and perhaps more so due to long term trauma effects of the disaster following Hurricane Katrina. Understanding the unique issues and needs of the city is important to help build solutions that can ensure and sustain resiliency in the face of crises.

Strength in the face of crisis must recognize the importance of the status of women, as women are often in the position of sustaining families and communities in crisis (Cohen, Nash, & Greaney, 2021; Cascella Carbó & Garcia-Orellán, 2020). In 2020, the Governor's Office released the first state report on the status of women and highlighted a number of concerns women face in the state (LWPRC, 2020). Louisiana at that time ranked last in the nation in the wage gap, with women earning 69 cents to the dollar men earned, and these gender wage gaps were even greater for Black and Hispanic women than for White women. Family leave and sick leave were also identified concerns. While unpaid family leave is guaranteed by state law, the majority of working women cannot take leave because they cannot afford the loss of wages; only 1 in 3 women in Louisiana took family leave after the birth of a child, compared with more than 1 in 2 women in the United States as a whole. Further, 2 in 5 employed people in Louisiana do not have paid sick leave, compromising not only their health, but also those who they may infect and their children who, when sick, may be unable to stay home with a parent. An additional concern was early childhood education, which is not a priority for state funding. Over 40% of children start kindergarten behind grade level. Inadequate support for working women and their children is particularly disturbing because approximately half of Louisiana mothers are the primary earner for their household.

The value of women is also seen by statistics on intimate partner violence (IPV) and maternal mortality rates. Louisiana is currently 5th in the nation for intimate partner homicide rates, and the rate of intimate partner homicide is 85% higher than that seen for the nation as a whole (LCADV, 2021). The state is also one of the poorest in terms of maternal mortality rate, with disproportionate pregnancy-related deaths reported among Black women (DeGruy, Teixeira, Evans, & Gillispie-Bell, 2024; Center-for-Reproductive-

Rights, 2024). Issues of IPV and maternal mortality are connected; intimate partner homicide is the leading cause of maternal death in Louisiana (Wallace, Crear-Perry, K, & Theall, 2020). Further compromising maternal health and survival in the poor access to birthing facilities, or maternal healthcare providers. More than 1 in 4 parishes lack a maternal health provider, and 12% of women have no birthing hospital within 30 minutes of their residence (Fontenot, et al., 2023). Policy efforts to restrict abortion access increased in the state subsequent to the Supreme Court's decision regarding Dobbs v Jackson Women's Health Organization. Research on the effects of these restrictions documents that patients and providers are delaying prenatal care to avoid medical miscarriage management, delay necessary care in high-risk pregnancies where termination may be required for maternal survival, and impede effective patient-provider communication on potential medical options (Center-for-Reproductive-Rights, 2024). Prioritization of women's health needs may be affected by underrepresentation of women in the state legislature (VoteRunLead, 2022). While women are 51% of the state, they are 27% of state representatives, and are only 12% of the Louisiana Senate.

New Orleans is the largest city in Louisiana, with a population of almost 370,000 people, and 53% of adult residents in the city are women (US-Census-Bureau, n.d.). It is in the top 50 largest metropolitan areas in the country. New Orleans's unique history and culture support a thriving tourism industry and a long history of immigration, bringing visitors and newcomers from around the world. While the city is rich in education, culture, and festive traditions, 23% of the residents are living in poverty (US-Census-Bureau, n.d.). Costs of housing and food are outpacing wages, and only half of homes in the city are owner-occupied. Further, the COVID-19 pandemic hit New Orleans early and hard; by March 2020, Orleans Parish had the highest per capita deaths of any county in the nation (Calvert, 2020). By April, the COVID-19 death rate was twice that of New York City, and again, mortality rates were significantly higher for Black New Orleanians. New Orleans also continue to face climate change and environmental concerns related to the unique location in the US (Brooks, 2020).

As New Orleans re-emerges from the COVID-19 pandemic crisis and approaches almost 20 years since Hurricane Katrina, it must consider broadly the needs of the city and the status of women to help tackle those needs. To that end, this report offers a descriptive study of publicly accessible demographic and health data to create a snapshot on the status of women in New Orleans. This research can offer city authorities and stakeholders digestible data points to guide evidence-based policy and support a more just and gender-equitable New Orleans.

METHODS

This report uses publicly available data from the US Census, New Orleans Crime Data, the Louisiana Department of Health, and other sources to assess from 2010 to 2022/2023 levels of education and employment, women's health, violence against women, and women's representation in politics in New Orleans or Orleans Parish, assessing differences by gender as well as by race/ethnicity and age where possible.

The report covers the following major areas of focus:

- Demographics: population size, age, educational attainment, migration, and US nativity
- Economics: income and wages, household poverty, government welfare services, employment, entrepreneurship, philanthropy
- Housing and Children: home ownership and renter occupancy, households with children, childcare access and costs
- Health: access to health care, birth rate, mortality rate and leading causes of mortality, birth rates, prenatal care, infant mortality, STI/HIV rate, and teen birth rate
- Gender-Based Violence Crimes and Policing Exposures: violent crime and imprisonment, intimate partner violence, rape and sexual assault, policing exposures
- Politics: voter registration and turnout, women's representation as elected officials
- Climate: heat and precipitation

The report presents descriptive data using visualizations developed using Flourish, an open-source data visualization tool.

The study was identified as exempt by the Tulane University Institutional Review Board.

RESULTS

DEMOGRAPHICS

Population Size

US Census data show that New Orleans has 369,749 residents as of July 2022, which is an almost 4% decline since April 2020, when the population size was 383,997 (US Census Bureau, ND). This is the steepest decline seen in any metropolitan area in the nation (Adelson, 2024). Prior to Hurricane Katrina in 2005, New Orleans had 455,845 residents.

Race and Ethnicity

Women comprise 52.8% of the total population of New Orleans. As of 2022, the population of women in New Orleans is 57.7% Black, 29.8% White and 5.5% Hispanic.

The proportion of men and women across race groups (Black, White, and Hispanic) have remained comparable between sexes of the same race, and fairly stable in the last decade. However, the data show a slight reduction in the percentage of women in New Orleans who are Black, from 61.3% in 2020 to 57.7% in 2022.

The proportion of “other races” has doubled in proportion for both men and women, but overall remain <1% of the total population. Despite the low number, the rapid increase in this demographic is worth noting.

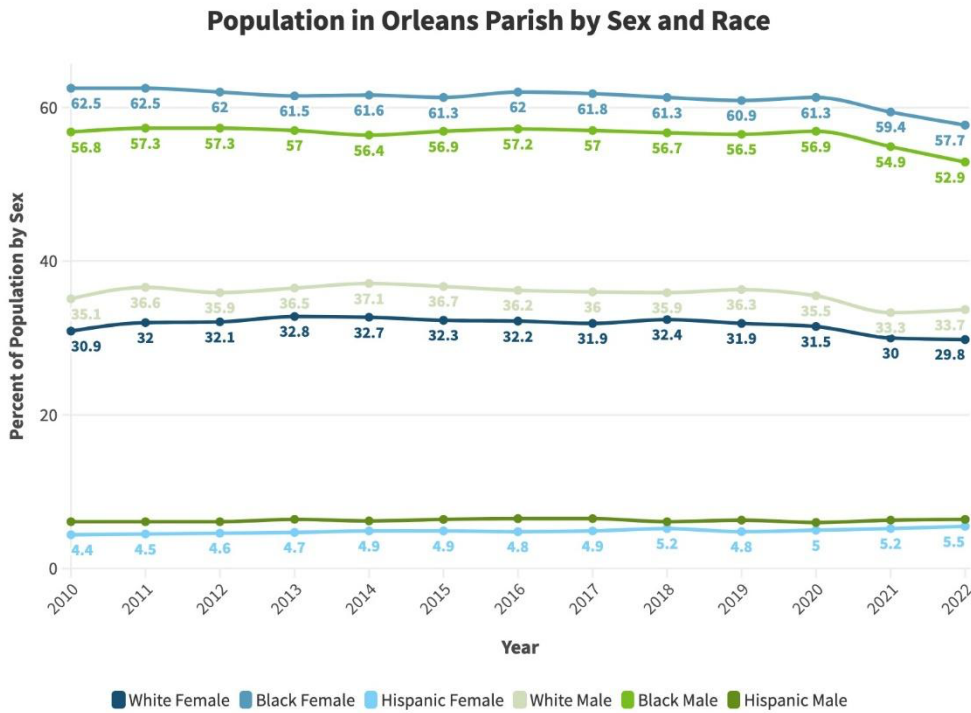


Figure 1 – Proportion of Black, White, and Hispanic populations in New Orleans

Age

The median age of Black women is 40.3 years, of White women is 40 years, and of Hispanic women is 32.9 years in 2022.

Among Black residents of New Orleans, the proportion of those under 18 years is currently higher than the proportion of those 65 years+. However, consistently since 2010, the community is undergoing a demographic transition, with a rising older population and a declining proportion of those under 18 years.

Among White residents of New Orleans, there is a much higher proportion of those over 65 years of age (women and men) compared to those under 18. While the older adult population has been consistently on the rise, there is a marked declining trend in the proportion of men and women under 18 years, since 2010.

Hispanic residents of New Orleans are the only racial/ethnic group of the three predominant races/ethnicities to have a larger young population (<18 yr) compared to an older population.

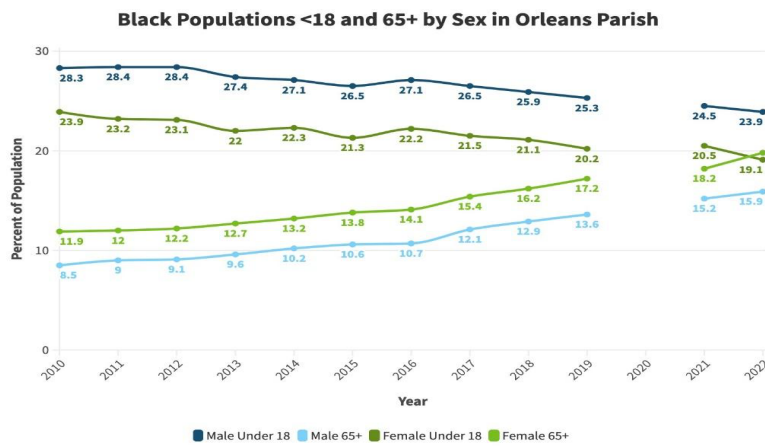


Figure 2 – Black population by age in New Orleans

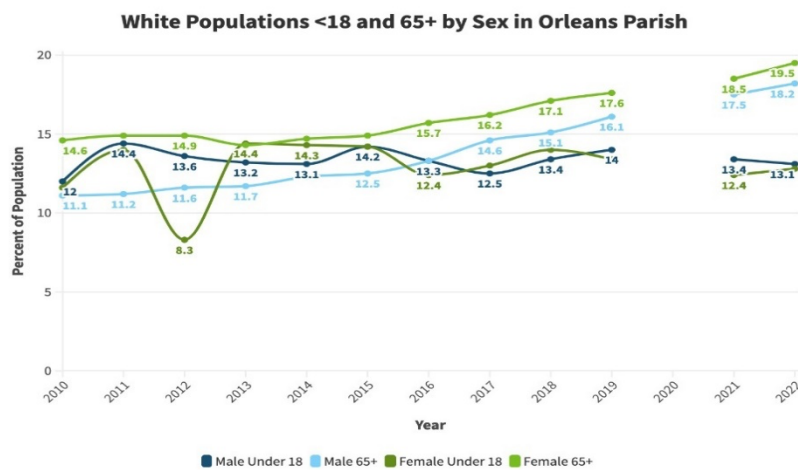


Figure 3 – White population by age in New Orleans

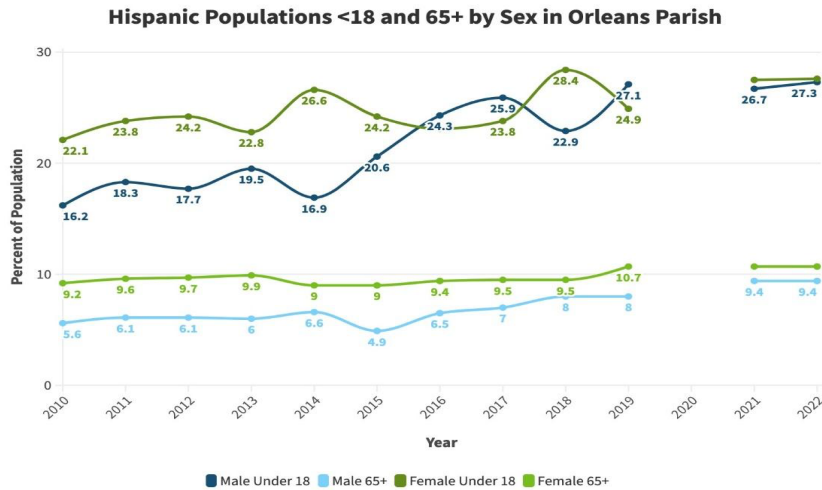


Figure 4 – Hispanic population by age in New Orleans

Education

New Orleans reports that those with a bachelor’s level college degree from 2000 to 2021 have nearly/almost doubled with rates among women increasing from 23% to 43% among women and rates among men increasing from 22% to 40%. However, stark racial disparities persist in educational level attainment.

Over two-thirds (69%) of White women, half (48%) of Hispanic women, and only one quarter (27%) of Black women report having a bachelor’s level degree or above in 2021. This is troubling since Black women make up over half of women in New Orleans (58%) in 2021, as noted above, yet report the lowest level of higher education levels.

In 2021, data on the highest education attainment showed that 27% of Black women had completed a high school degree (vs 21% White women), 34% of Black women reported having some college degree (vs 17% White women) and 27% of Black women reported having a Bachelor’s or higher degree (vs 69% White women).

Among Black men in the same year, 36% had completed a high school degree, 31% reported having some college degree, and 18% reported having a Bachelor’s or higher degree.

Importantly, while college entry is higher for New Orleans residents compared with Louisiana residents as a whole, data from 2022 indicate that New Orleans has a lower rate of high school graduation than seen in the state as a whole (78% vs 85%).

Highest Level of Educational Attainment in Orleans Parish for Adults Ages 25+ by Race and Sex

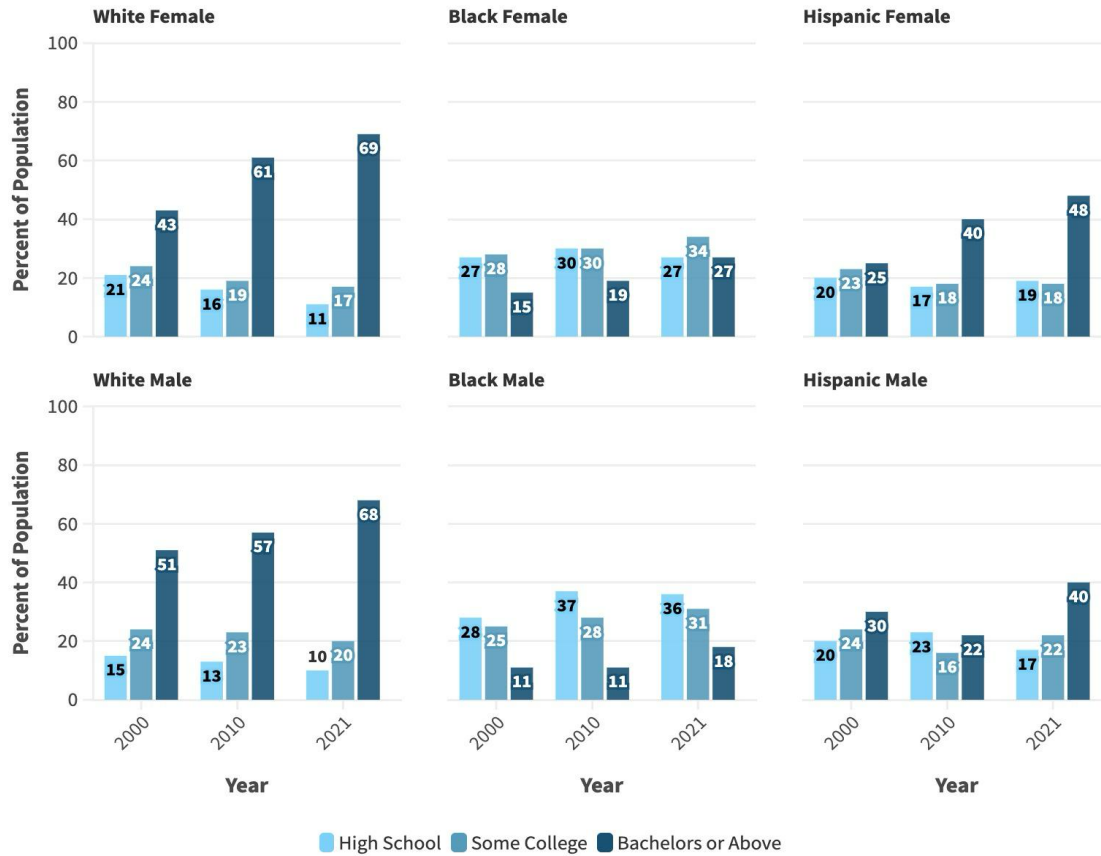


Figure 5 -Education attainment by race/ethnicity.

Migration

The number of newcomers to New Orleans has been on a decline since 2010, dropping from 27,149 people in 2010 to 17,859 in 2022. The New Orleans metro area has experienced a significant population decline since 2020, with a 4.3% loss between 2020 and 2023. This is the largest population decline of any large metro area in the United States during that time period. The population of Orleans Parish, which includes New Orleans, dropped by 7,200 people, or 2%, between July 2022 and July 2023.

Among those who moved to New Orleans in 2022, 47% moved from another state, 46% moved from a different parish within Louisiana and 7% moved from abroad.

Of female newcomers in 2022, 43% moved from another state, 50% moved from a different parish and 8% moved from abroad.

Corresponding to the very small percentage of people moving to New Orleans from abroad, the foreign-born population is relatively small in New Orleans, just 5.6%. This is slightly higher than that seen for Louisiana as a whole, which stands at just 4.2%, but much smaller than that seen for the US, 13.7%. Declines in population size and minimal entry of new residents from outside the state or country suggest inadequate economic opportunity available in the city.

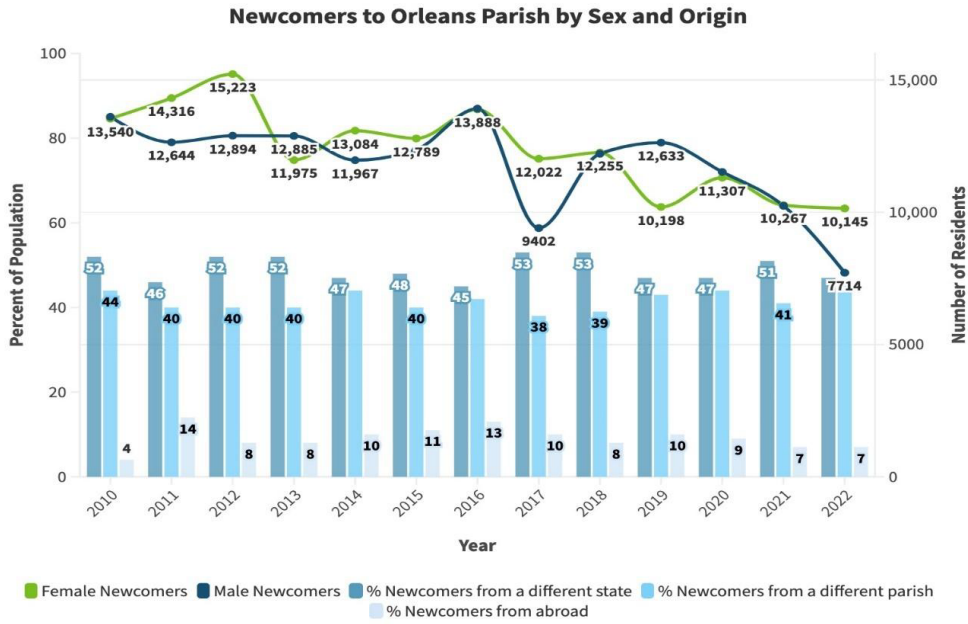


Figure 6 – Newcomers to New Orleans from different states, parishes, and from abroad

ECONOMICS

Employment

The unemployment rate in New Orleans has been in decline since 2010. The latest data from 2022, show that the unemployment rate is 6.5% among men and 6.9% among women, and higher than the national rate of 4%.

Among women with children under 6 years, the employment rate has been over 70% since 2010. It is currently at 82.5% in 2022, which is higher than the national average at 73.4%, indicating the greater need for this income.

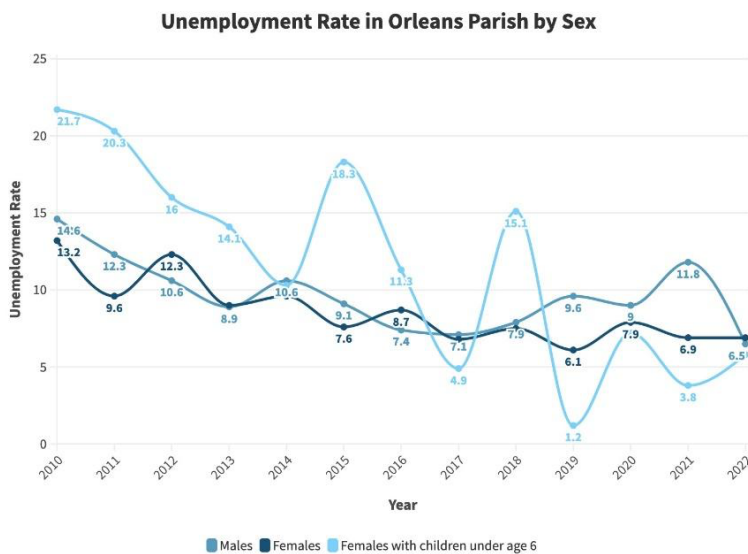


Figure 7 – Unemployment rate in New Orleans

Wages

The median income for men and women has been on the rise in New Orleans since 2010 (31% and 40% increase for men and women respectively). The wage gap between men and women has decreased but persists—women earn only 86% of what men do with a similar job. The wage gap is starker among White populations—White women earn 79% of what White men earn in 2022. The wage gap is much less among Black and Hispanic populations (>95% respectively).

Racial/ethnic disparities for wages in New Orleans are notable. White earners consistently earn more than Black and Hispanic earners. The median earnings for White women in 2022 was USD 62,468, compared to Hispanic women earners USD 44,321 and Black women earners at USD 41,582. The largest discrepancy is between median wages between White men and Black women, at USD 78,994 and USD 41,582 respectively.

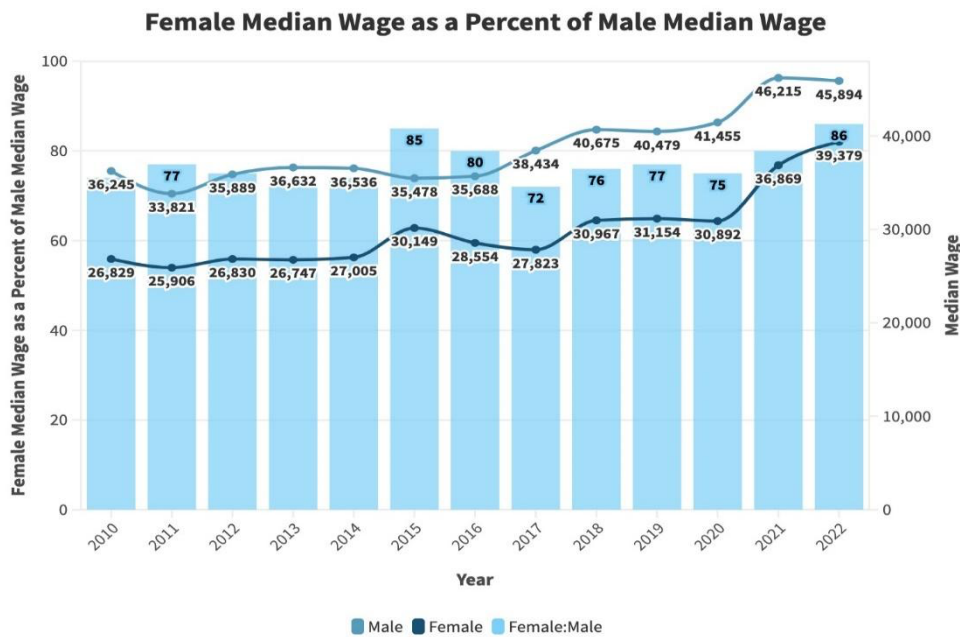


Figure 8 – Median wages by sex

Wages by Occupation

Women earners are paid less than their male counterparts across all 5 sectors—professional, service, sales and office, natural resources/construction/maintenance, and production/transportation/material moving. Overall median wages have increased, but the gender wage gap persists.

While the wage gap has remained stable across all sectors except for the natural resources/construction/maintenance—in 2017, women in this sector were earning more than men, but there has been a sharp decline in female median wages, increased the wage gap since (it is to note that this sector has a low number of female employees).

Female Median Wage as a Percent of Male Median Wage Across Sectors



Figure 9 – Female:Male medians wages across 5 sectors

Household Income

Median household incomes are increasing, but this increase is greater for married couple households compared to single person led households. Married couple households also have a far higher household income relative to single person led households. Households led by single men see a higher income than those led by single women.

New Orleans has much higher household income inequality levels compared to the national levels. In 2023, the ratio of the household income between the top 80th percentile and the bottom 20th percentile is 7.9 in New Orleans, compared to 4.9 nationally.

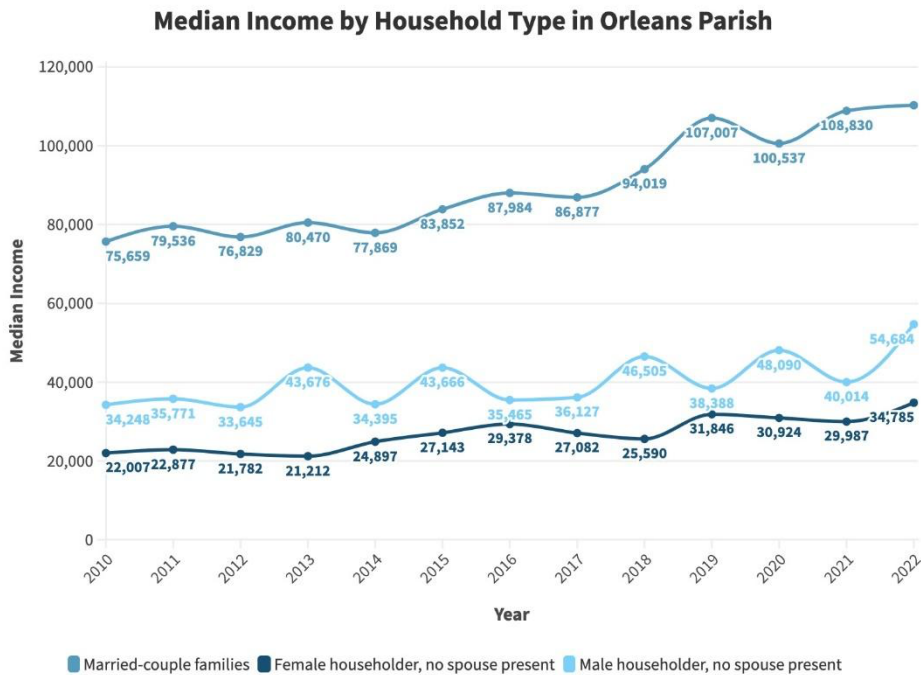
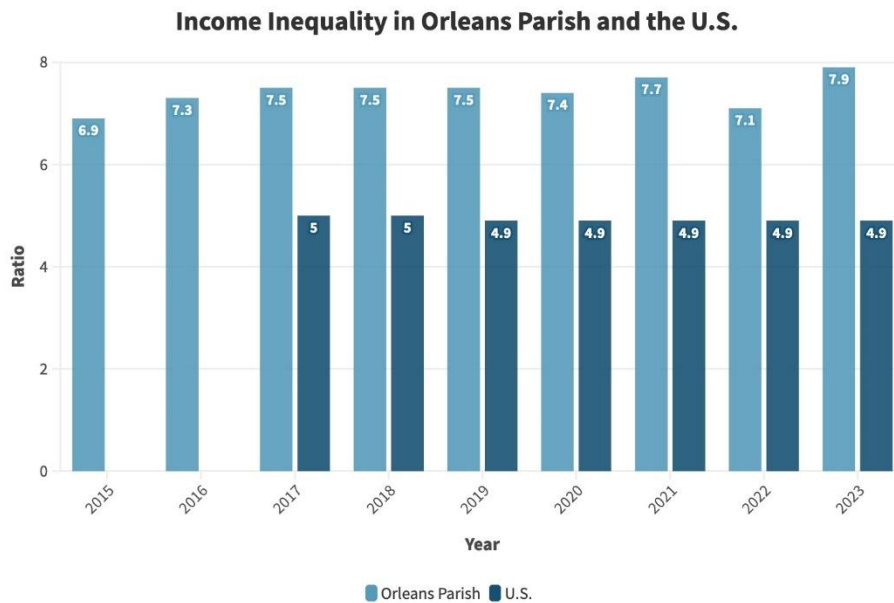


Figure 10 – Median income by household type



Ratio of household income at the 80th percentile to income at the 20th percentile.
 No data for the U.S. in 2015 and 2016.

Figure 11 – Income inequality in Orleans Parish compared with national figures

Poverty

Poverty rates in New Orleans have marginally declined since 2010 but remain an issue of concern. In 2022, 24% of women (approximately 1 in 4) and 21% men (1 in 5) are below the poverty level. Higher proportions of Black and Hispanic households (26.6% and 19.5% respectively) live below the poverty line than White households (4.6%). Across all three races, women-headed families have higher poverty rates than non-women-headed families within their respective races. Since 2020, there is a decline in poverty among White female-headed families (14% in 2020 to 12.8% in 2022). However, Black and Hispanic female-headed families have reported increasing levels of poverty since 2020—36.7% to 41.4% and 25.8% to 44.4% among the same time frame respectively.

Percent of the Orleans Parish Population by Sex Below the Poverty Level

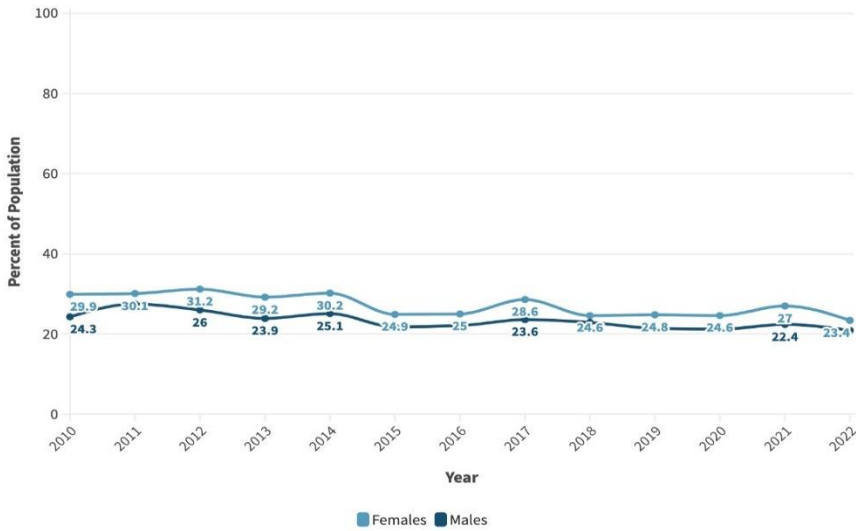
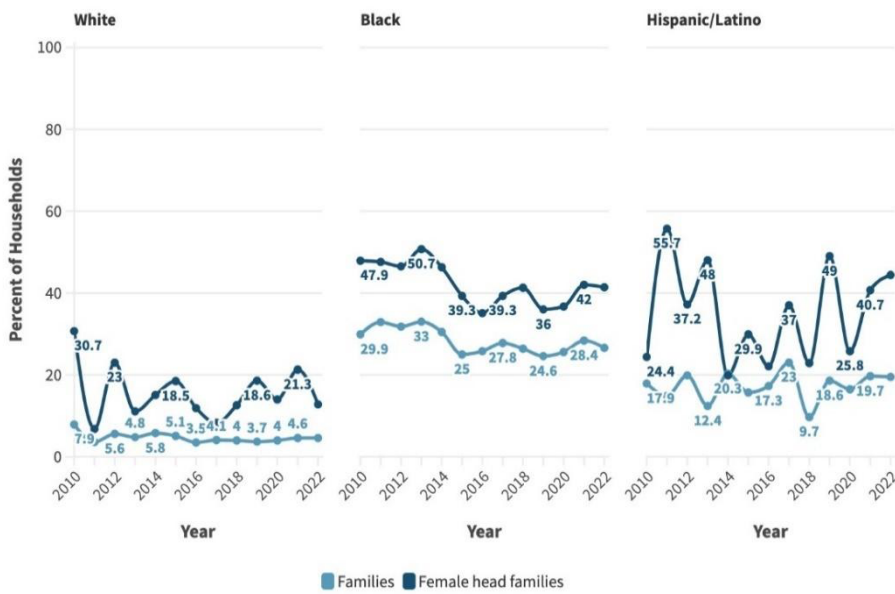


Figure 12: Poverty rates by sex

Percent of Households Below Poverty Level by Household Type and Race



Poverty status in the past 12 months of families, the % below poverty level of all families and female householder, no husband

Figure 13 – Poverty rates by household type and race

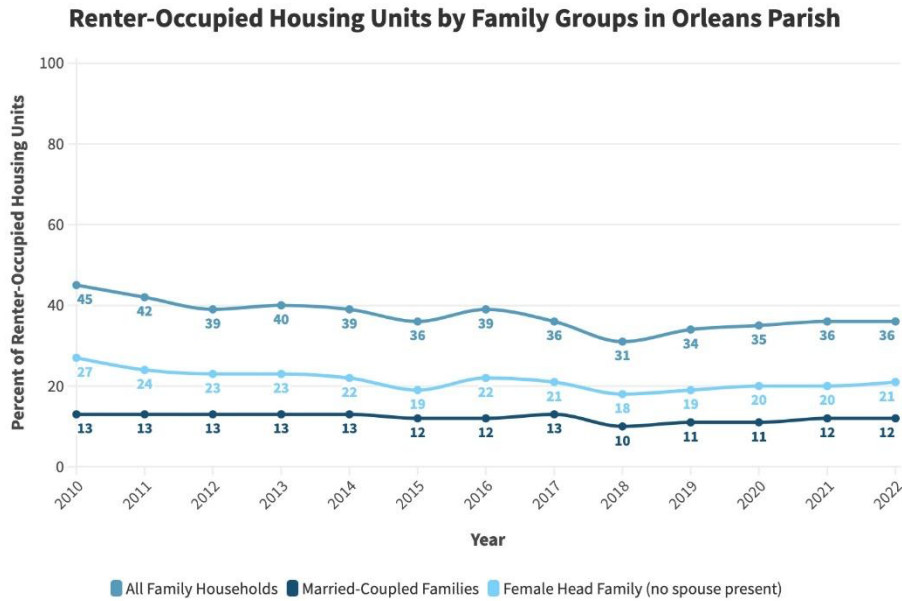
US Census data indicate that poverty is higher in New Orleans relative to Louisiana as a whole, with 23% of New Orleanians living in poverty compared with 18% of all Louisiana residents. Children are more likely to be living in poverty; data from LouisianaBudget.Org indicate that 1 in 4 children in Louisiana live in poverty (US-Census-Bureau, n.d.; LBP, 2022). This is likely a conservative estimate for New Orleans given the higher poverty rate and suggests that more than 20,000 children under 5 years in city are living in poverty.

HOUSING AND CHILDREN

Housing

In 2022, 63% of families and 45% of married people owned a home. Among renters, 26% were families and 12% were married people. Female-headed households comprised a higher proportion of renters (21%) compared to owners (15%).

Data from 2022 shows that the median gross rent for families is 36% of the total income, compromising women's longer-term economic security as renters.



All family households include married-couple families, female head families (with no spouse present), and male head families (with no spouse present).

Figure 14 – Proportions of renter-occupied housing units by family type

Unhoused/Homelessness

Data on the unhoused or homeless population include Orleans and Jefferson Parishes combined. The homeless population peaked in 2007, at 11,619 people, likely due to Hurricane Katrina fallout. Homelessness dramatically and then steadily declined since, and currently stands at 1390 in 2023. Those reporting housing problems, such as overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities, have also marginally declined, from 28% in 2014 to 25% in 2023. There are no sex- and race-disaggregated data on this population.

Individuals Experiencing Homelessness in New Orleans and Jefferson Parish

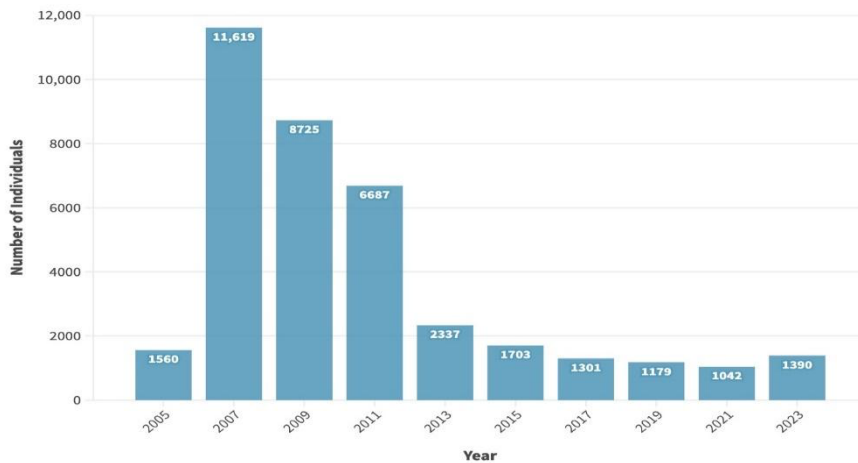


Figure 15 – Number of homeless individuals in New Orleans and Jefferson Parish

Children and Childcare

Children under age 18 years constitute 19.6% of New Orleans residents; children under age 5 years are only 5.6% of the city. In 2022, approximately 24% of households in metro New Orleans included children, down from 34% in 2000 (The Data Center, 2023). There are no childcare costs data specific to New Orleans, but state data document that the childcare costs as a proportion of median income is increasing in the state, from 15% in 2005 to 20% in 2017, the most recent data available. A study of Louisiana parents in 2023 similarly found that the majority of parents of children under 5 in the state (60%) were concerned about the affordability of childcare and struggled to meet basic household expenditures (Sonnier, et al., 2023).

Center-Based Child Care Costs as a Percent of Median Income in Louisiana

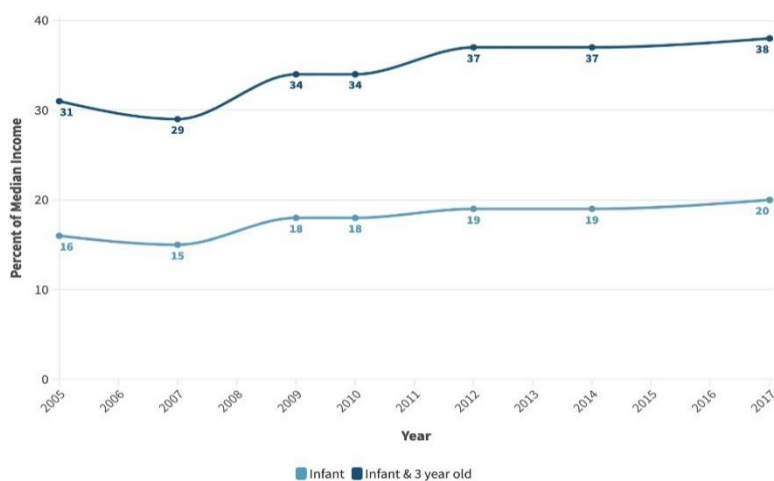


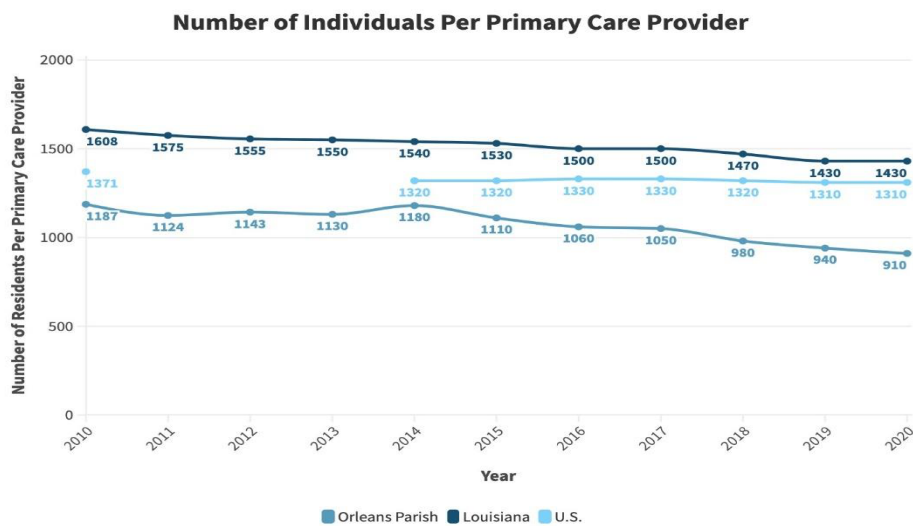
Figure 16 – Cost of childcare as a proportion of median income

HEALTH

Health Care Access

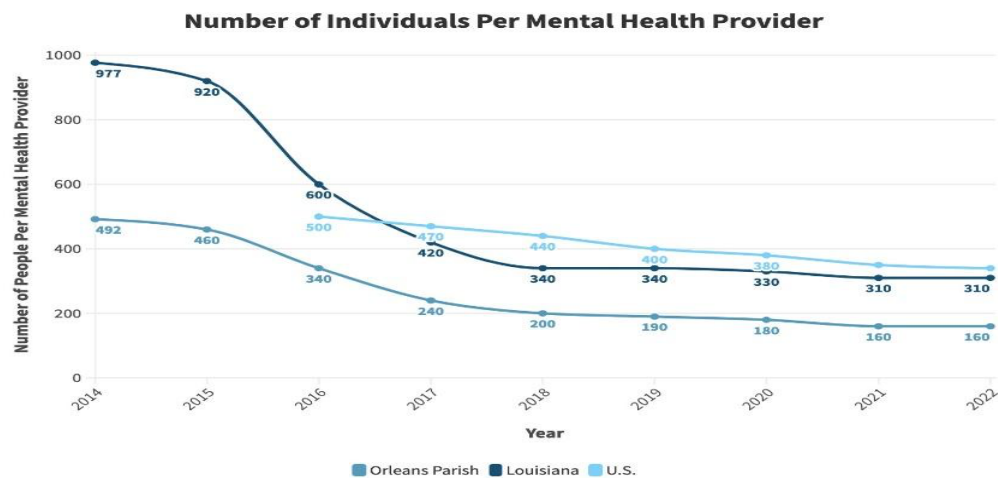
There are 90.82 OB/GYNs per 100,000 women in 2021-22. This is much higher than the state rate of 15 OB/GYNs per 100,000 women and is likely attributable to our unique position in the state in terms of housing major medical centers.

New Orleans has also improved access to both primary care providers and mental health providers since 2014. In 2014, 1180 people were served by one general provider. The current figure in 2022 is 910 per provider. Similarly, in 2014, 492 people were served by one mental health provider. The current figure in 2022 is 160 per provider. New Orleans fares much better on both health access indicators compared to both Louisiana and national estimates.



No U.S. data available for 2011-2013.

Figure 17 – Number of individuals per primary care provider in New Orleans, Louisiana and the US



No U.S. data available for 2014 and 2015.

Figure 18 – Number of individuals per mental health provider in New Orleans, Louisiana and the US

Life Expectancy and Leading Causes of Death

Louisiana has among the lowest life expectancies in the nation, with lower life expectancies for men compared to women and Blacks compared with Whites (CDC, 2020).

For women, the top two leading causes of death are heart disease and cancer. Deaths due to heart disease have been on the rise since 2014, while death rates due to cancer have been declining since 2000. There has also been an increase in deaths due to accidents or unintentional reasons between 2014 and 2020. In 2020, a new leading cause emerged—COVID-19. More details on the mortality due to COVID-19 is presented below.

Top 5 Leading Causes of Death in Females per 100,000 People in Orleans Parish

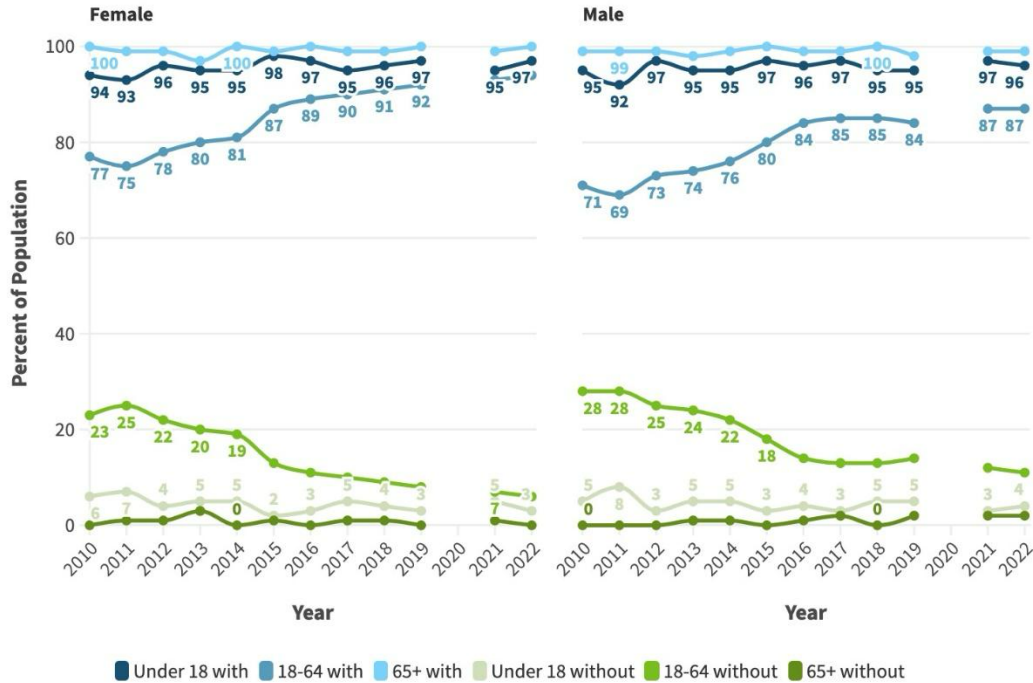
2000	2005	2010	2015	2020
Heart disease (255)	Heart disease (213)	Heart disease (186)	Heart disease (162)	Heart disease (180)
Cancer (212)	Cancer (177)	Cancer (174)	Cancer (161)	Cancer (156)
Cerebrovascular (80)	Accidents, unintentional (100)	Cerebrovascular (42)	Cerebrovascular (43)	COVID (119)
Diabetes (62)	Cerebrovascular (62)	Alzheimer's disease (25)	Alzheimer's disease (37)	Cerebrovascular (55)
Respiratory (30)	Diabetes (42)	Nephritis (24)	Accidents, unintentional (33)	Accidents, unintentional (55)

Figure 19 - Leading causes of death per 100,000 people from 2000-2020

Health Insurance

In 2016, Louisiana extended Medicaid coverage for adults earning up to 138% of the federal poverty level (Diana, et al., 2019). As of 2022, 97% of women below 18 years, 94% of women between 18-64 years, and 100% of women over 64 years were insured. This is a significant increase, particularly for women between 18-64 years; in 2012, only 78% of this demographic was insured. There is some cause for concern among men, as well—only 87% of men between 18-64 years are insured.

Insurance Coverage in Orleans Parish by Sex and Age



No data available for 2020.

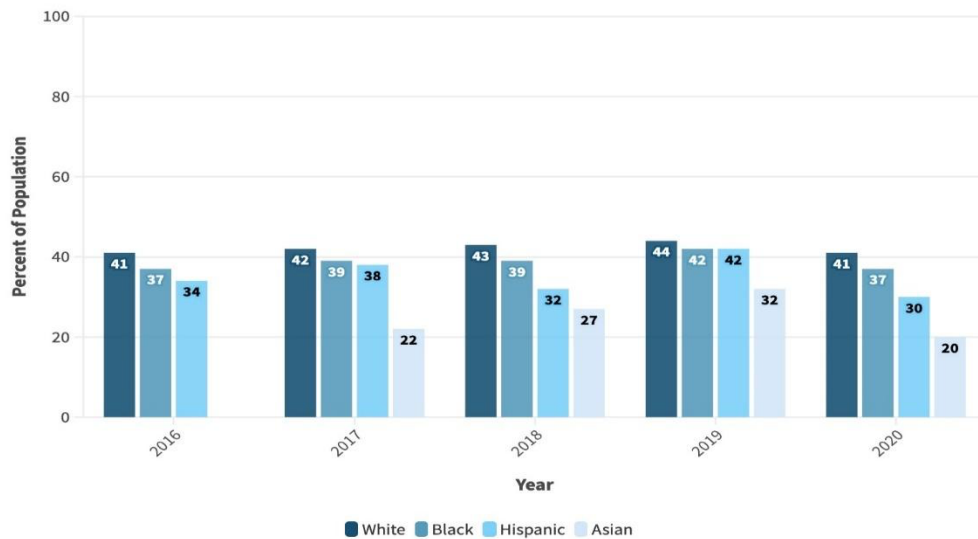
Figure 20 – Insurance coverage by age and sex

Mammograms

The proportion of women with Medicare in New Orleans who received a mammogram in 2020 is 38%. This is comparable to state (37%) and national (37%) figures. However, this represents a decline for the city relative to that seen in 2019 (42%); the drop is most likely due to limited health service provision during the COVID-19 pandemic.

We also see some racial/ethnic disparities. Among those on Medicare, lower proportions of Asian women received a mammogram, compared to Black, Hispanic and White women.

Percent of Females with Medicare that Received a Mammogram in Orleans Parish by Race



No data available for the percent of Asian females with medicare that received a mammogram in 2016.

Figure 21 – Mammograms received by race

Sexual Transmitted Infections

Louisiana has among the highest rates of sexually transmitted infections (STIs) in the nation, with increases seen in rates of gonorrhea and syphilis and stagnation seen in rates of chlamydia, the most common STI (CDC, 2021). Black and Hispanic women see a higher prevalence of STIs than White women in the state and in New Orleans. Data from 2023 indicate that the gonorrhea rate among Hispanic women is more than twice that among White women (230 per 100,000 people and 107 per 100,000 people respectively). Data for gonorrhea rates among Black women was unavailable. The chlamydia rate in 2021 is over four times higher for Black women (1774 per 100,000 people) compared with White women (444 per 100,000 people), and over twice as high for Hispanic women (1063 per 100,000 people). Similarly, racial/ethnic disparities are also seen in primary and secondary syphilis.

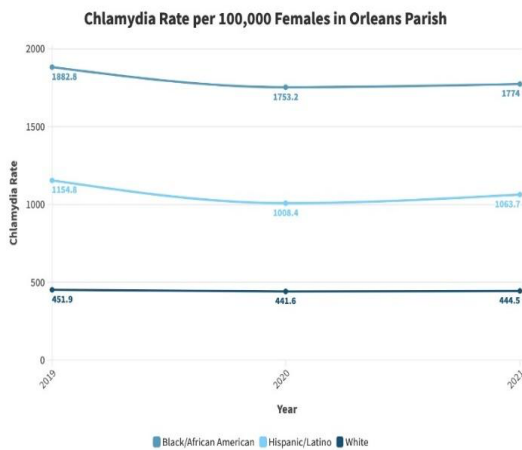
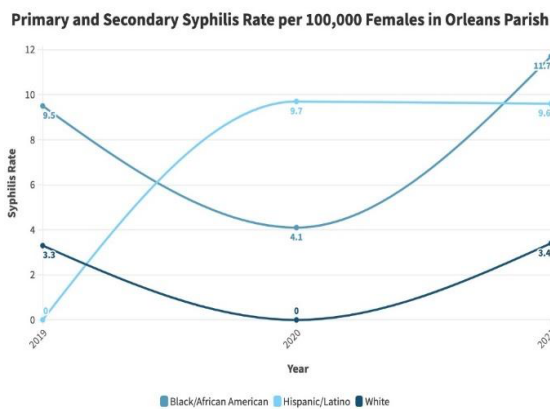


Figure 22 – Chlamydia rate per 100,000 females



The Hispanic/Latino female population had a syphilis rate of 0 in 2019.
The White female population had a syphilis rate of 0 in 2020.

Figure 23 – Syphilis rate per 100,000 females

HIV/AIDS Prevalence and Linkage to Care

Death data for the year 2021 are preliminary and based on death data received by CDC as of December 2022. Death data for years 2020 and 2021 should be interpreted with caution due to excess deaths in the United States population attributed to the COVID-19 pandemic.

HIV prevalence has remained largely consistent among women across race/ethnicity from 2019-2022. The prevalence of AIDS has marginally increased among Black and Hispanic women during this period. The highest prevalence of AIDS is for Black women, followed by Hispanic and White women, and AIDS deaths follow a similar pattern of racial/ethnic disparities.

Importantly, 2023 saw an 11% decline in new HIV cases for the state over the past five years (LDH, 2023).

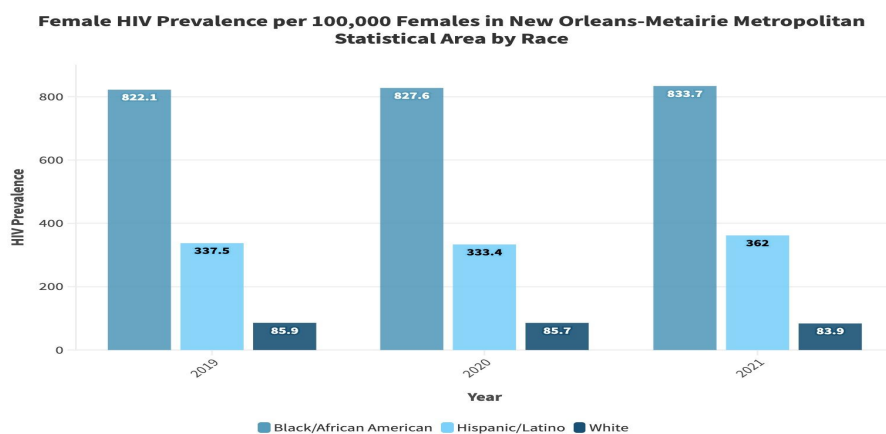


Figure 24 – HIV prevalence among females

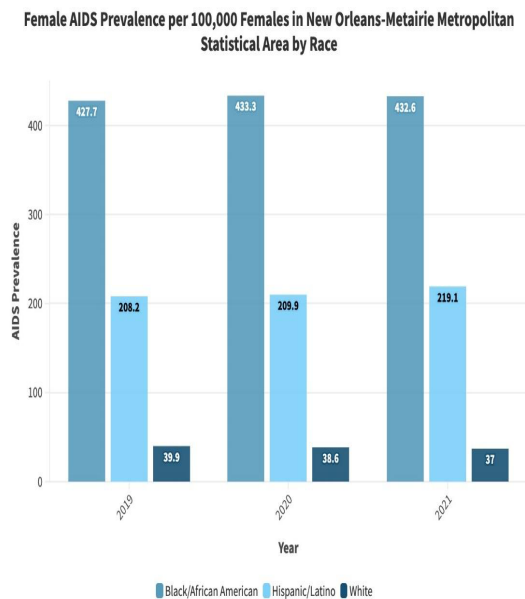
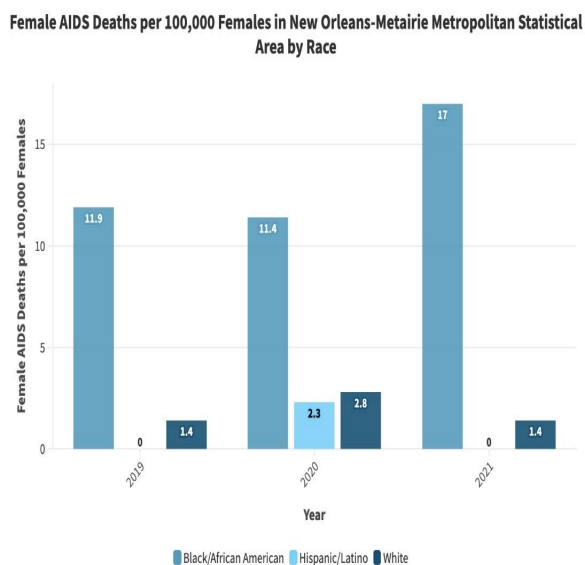


Figure 25- AIDS prevalence among females, by race



In 2019 and 2021, the rate of female AIDS deaths per 100,000 females for the Hispanic/Latino population was 0.

Figure 26 – AIDS-related deaths among females, by race

HIV Linkage to Care

Declines in HIV prevalence can be traced to improvements in diagnosis, linkage to medical care, and medical adherence among people living with HIV. HIV medical care received among Black women has remained stable from 2018-2021, ranging between 80-81%. There has been a decrease in the care received for HIV+ White women, from 71.1% in 2019 to 62.5% in 2021, and for HIV+ Hispanic women, from 77.1% in 2019 to 73.6% in 2021. Loss to care should be monitored, particularly for White and Hispanic Women.

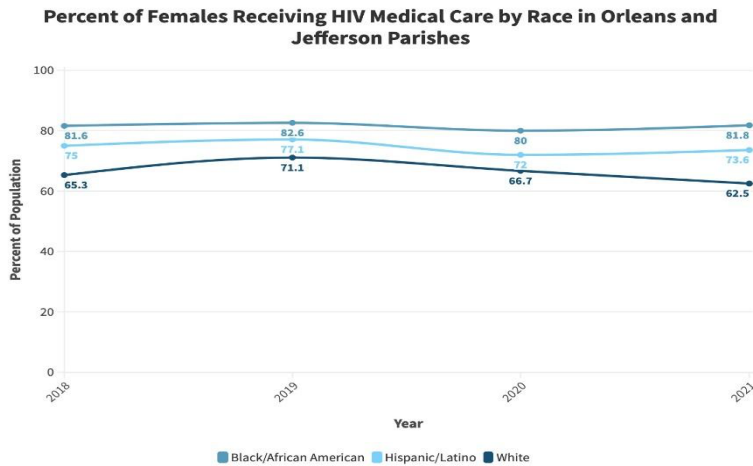
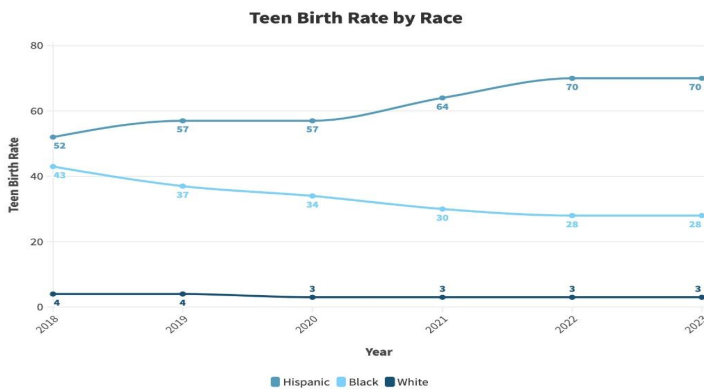


Figure 27 – Proportion of females receiving HIV medical care, by race

Teen Birth rate

The teen birth rate in New Orleans has been declining since 2011, from 56 births per 1000 girls aged 15-19 in 2011 to 23 births per 1000 girls in 2023, consistent with national trends. However, racial/ethnic disparities persist with Black and Hispanic teens—there is a huge disparity between teen birth rates between the White population and Black and Hispanic groups seeing 28 and 70 births per 1000 girls, respectively, and Whites seeing 3 births per 1000 girls. Support for adolescent sexual and reproductive health education and access to contraceptives can help address these concerns.



Teen birth rate is the number of births to females ages 15-19 per 1,000 females. The estimates provided are 7-year averages.

Figure 28 – Teen birth rate, by race

Total Birth rates and Prenatal Care

We see a sustained low fertility rate in the past few years, corresponding with an aging population. In 2021, there were 4,169 live births in New Orleans, indicating a fertility rate of 49.6 births per 1,000 women aged 15-44. Of all live births, 57.4% were Black, 28.4% were White, 10.7% were Hispanic, 2.4% were Asian/Pacific Islander and 0.1% were American Indian/Alaska Native, suggesting a slightly higher representation of Hispanic births to Hispanic residents. This corresponds with above noted data regarding growth in this population in New Orleans.

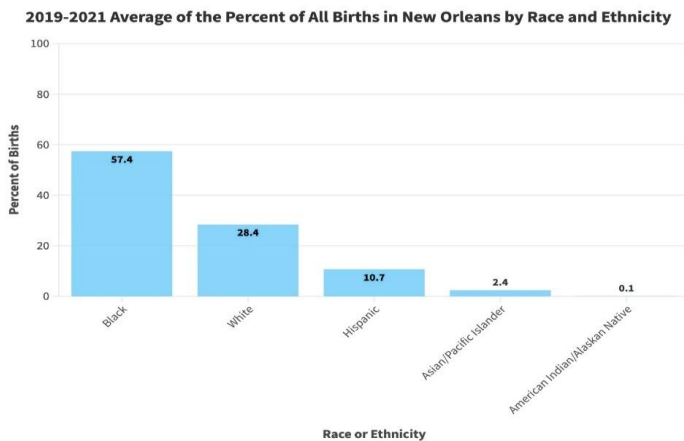
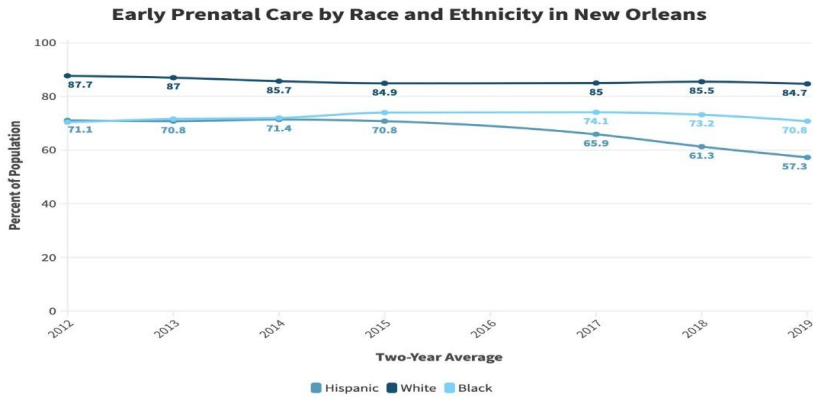


Figure 29. Births by Race/Ethnicity

In 2021, 69.6% of live births in New Orleans were to women who received early prenatal care and 9.6% were to women receiving late or no prenatal care. The proportion of live births receiving early prenatal care is higher in Louisiana (75%) and in the US overall (78%).

In New Orleans during 2018-2020, White women or birthing people (84.7%) had the highest rates of early prenatal care, followed by Asian/Pacific Islanders (76.8%), Blacks (70.8%) and Hispanics (57.3%). Rates of early prenatal care have declined since 2016. With respect to adequate care, White (85.8%) mothers had the highest rates of adequate or more than adequate prenatal care, followed by American Indian/Alaska Natives (81.3%), Asian/Pacific Islanders (78.9%), Blacks (71.5%) and Hispanics (56.5%) —in 2018-2020 (average). Hispanic mothers are disproportionately affected. The rate of inadequate prenatal care among births to Hispanic women (34.4%) was about 3 times higher than the rate among White women (8.3%).

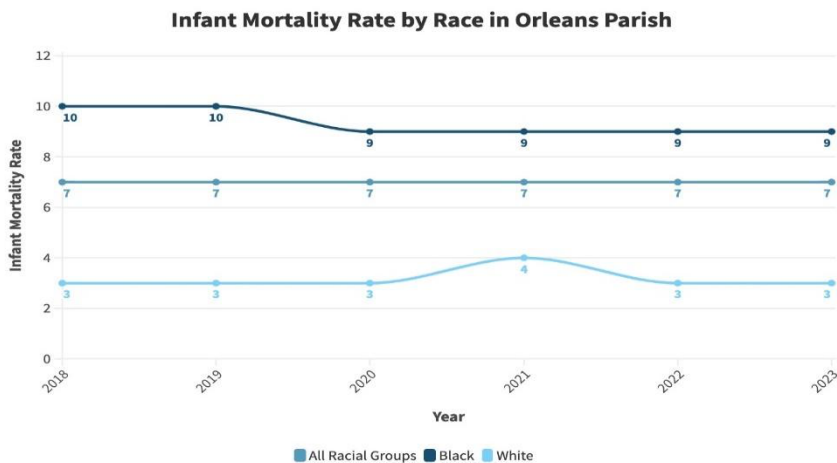


Each year represents a two-year average. For instance, the 2012 data represents the average data from 2011 to 2013.

Figure 30- Receipt of early prenatal care, by race

Infant mortality rate

The infant mortality rate (IMR) in New Orleans has been stable at 7 (7 infant deaths per 1000 live births) since 2018. This is a lower rate than in Louisiana (IMR = 8), but slightly worse off than the national level (6). However, there are major racial disparities—IMR among Blacks is currently at 9 deaths per 1000 births and among Whites, 3 deaths per 1000 births.



Infant mortality rate is the number of infant deaths (under one year of age) per 1,000 live births. Each year represents a 6-year average. For instance, the data from 2018 is an average of 2010-2016 data, and 2019 data is an average of 2011-2017 data.

Figure 31 – Infant mortality rate by Race

COVID-19

As noted earlier, the COVID-19 pandemic hit New Orleans early and severely in March 2020, but case identification increased in 2021. More women tested positive for COVID-19 compared to men. The data shows a spike in age-adjusted mortality rates in 2020, rising from 441.7 in 2019 to 577.3 in 2020—this spike is likely due to deaths related to COVID-19. Unfortunately, there is no data for COVID-19 infection by sex or race in New Orleans, but state data show higher rates of COVID-19 mortality for men and racial/ethnic minorities (Guangxiao, Hamovit, Croft, Roberts, & Niemeier, 2022).

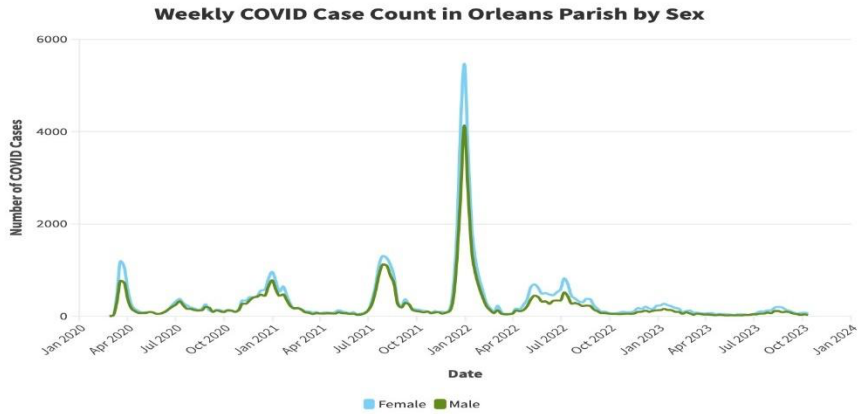


Figure 32 -COVID case count by sex

CRIME AND POLICING

Crime and Incarceration

FBI Crime data for 2022 show that violent crime is declining in New Orleans and in Louisiana, as well as nationally (FBI, 2022). However, our rates of violent crime remain substantially higher than that seen for the US as a whole. Louisiana has a violent crime rate of 629 offenses per 100,000 people as compared to 381 offenses per 100,000 population nationally. Louisiana data show that most violent crime occurs at the hands of someone known to the victim and in a residential setting, and most victims and perpetrators are between the ages of 20 and 39 years. Almost one in four of these violent crimes (23%) involve a current or former partner in Louisiana, compared with 17% of violent crimes nationally involving a current or former partner in the US. These violent crimes against a partner mostly involve male partner violence against women.

Data from the Vera Institute of Justice show a steady increase in representation of women relative to men in prison and jail in Louisiana over the past 40 years (Vera Institute, 2019). Racial/ethnic disparities also persist in the prison system. Black people compose 33% of Louisiana, but 52% of people in jail and 67% of people in prison. While much attention is given to crime in New Orleans, per capita incarceration is higher in rural areas. Orleans Parish is not even among the top 10 parishes in the state with people per capita in prison or jail. Nonetheless, New Orleans does have a high imprisonment rate, at 652 per 100,000 residents (Larose, 2023). However, in 19 of the 72 neighborhoods in New Orleans, the imprisonment rates are greater than 1000 per 100,000 residents; importantly, these neighborhoods are disproportionately Black, low income, and in low elevation which is more susceptible to flooding.

Rapes

Rape data were obtained from the FBI Crime Data Explorer database. In 2022, the rape rate (per 100,000 people) was 119.5 in New Orleans, compared to 43 in Louisiana. The highest rate was recorded in 2019 (198.4 rapes per 100,000) and there has been a decline in the rape rate ever since, but there is indication of a plateauing in the rate of rape since 2021. It is important to understand that higher rape reporting can be the result of greater comfort in rape crime reporting among victims as much as it could be due to higher prevalence of rape crimes. Comparative data should be viewed cautiously.

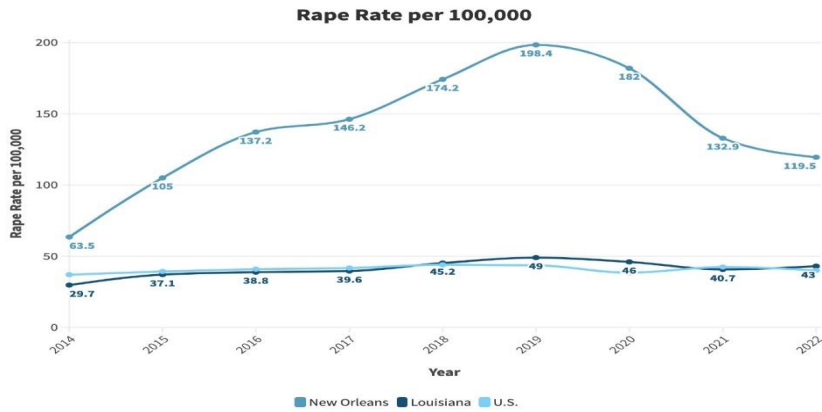


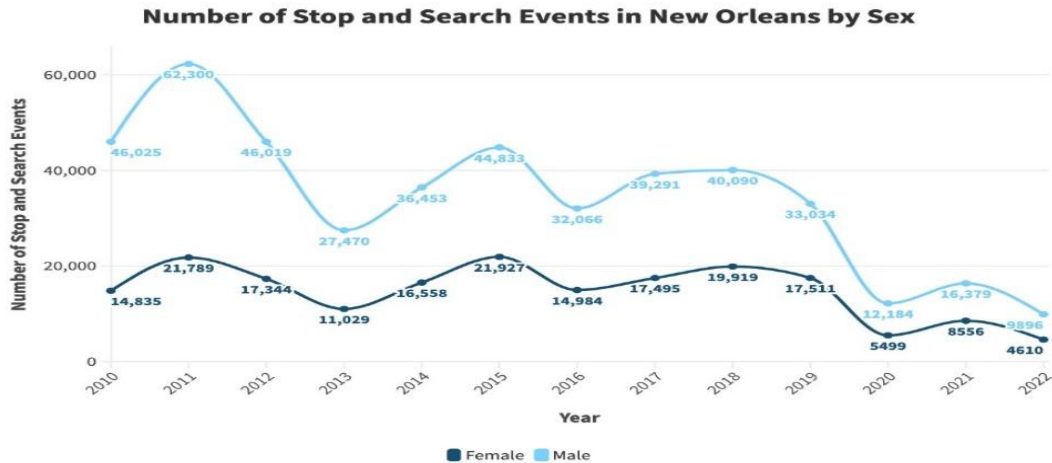
Figure 33 – Rape rate per 100,000 people for New Orleans, Louisiana, and the United States

Intimate Partner Violence

Intimate partner violence (IPV) data is difficult to capture because most women do not report these experiences to the police, but crime data are typically the only available data on IPV. However, given the importance of this issue for women, we felt it was important to include some data to offer insight, and there are data at the state level that offer 2023 estimates of IPV prevalence among women in the state. This study found that half of all women in the state (55%) have experienced emotional, physical, or sexual IPV in their lifetime (Raj A, August 2023). Lethal forms of IPV are not uncommon with 21% of women reporting that they have been choked or suffocated by a partner, and 6% of women have had a partner threaten or use a knife or gun against them. FBI Crime data indicate a decline in homicides including femicides in the past decade for the state, but we do see overrepresentation of IPV-related violent crimes among total violent crimes in 2022 for Louisiana compared to the US as a whole (22% vs 17%).

Policing: Stop and Search

There is a decline in the rates of stop and search by police in New Orleans since 2010, for both women and men, but men remain the majority of those affected.



This is a subset of data collected when individuals are interviewed by NOPD Officers (including individuals stopped for questioning and complainants).

Figure 34 – Number of stop-and-search events, by sex

Data from the City of New Orleans 2022 Stop and Search Annual Report show a steady decline in stop-and-search events from 2015 to 2022. The data report 33 allegations in 2015, to 17 in 2019, to 6 in 2022. Most of these events were directed toward Black people (72%). Analysis of every combination of race, sex, and age category found that the group with the largest percentage of stop and search experiences was Black men aged 35 to 64 (19.7%), and secondarily, Black men aged 25-34 (14.0%). Among women, the most likely group to be stopped was Black women aged 35 to 64 (8.5%) and secondarily, Black women aged 25-34 (7.7%). Search and stops for Hispanic and Asian people were <1%. Most of these search and stops was in the context of a traffic violation (45%) or a call for service (31%).

POLITICS

Voting

Data from 2013-2020 show higher voter turnout for women compared with men, though more recent data (2021-23) show more similar voter turnout proportions by gender. There is a significant decline in voter turnout since 2021. Upcoming presidential election data in 2024 will help establish if voter turnout will return to pre-pandemic levels.

Orleans Parish Voter Turnout and Percent of Population Qualified to Vote

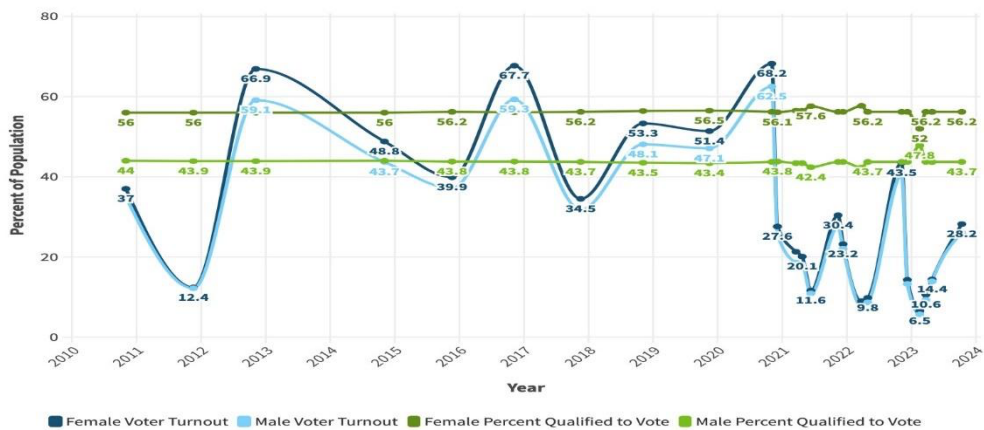


Figure 35 – Voter Turnout by Sex

Women’s Representation in Politics

Women occupy 44% of the total political seats in New Orleans, and 64.2% of women-held political seats are occupied by Black women. Overall, more than a quarter of all political seats (28.5%) are held by Black women; and 12.7% are held by White women.

Percent of Elected Offices by Sex in Orleans Parish and Louisiana

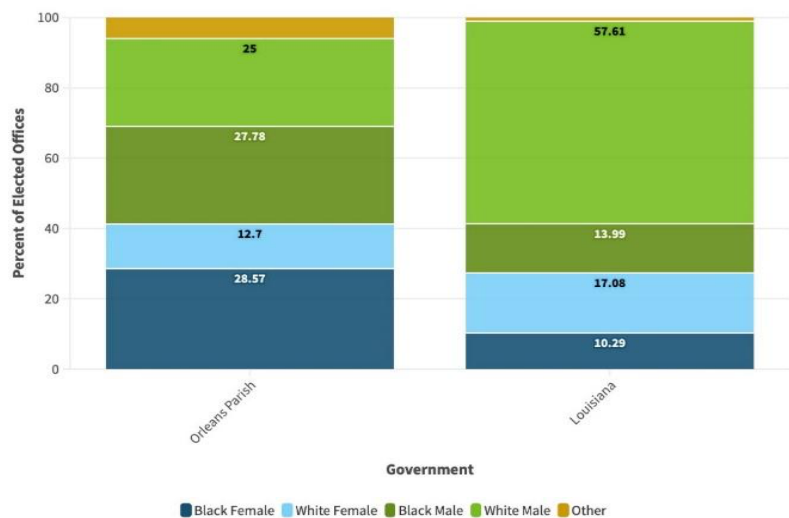


Figure 36. Representation of elected officials by gender and race/ethnicity

CLIMATE

New Orleans contends with both extreme heat and high precipitation. The number of extreme precipitation events appears to have increased over the past 20 years. Climate impacts can disproportionately affect those in poverty, as they are more likely to live in lower elevation areas. These include women with young children. As noted in the discussion of incarceration, these areas of lower elevation are also areas with higher levels of incarceration. Further, global evidence suggests increases in physical IPV following climate crises, and research from New Orleans shows that women in households that faced more storm damage from Katrina were more likely to experience physical IPV (Cannon & Kovach, 2023; Harville, Taylor, Tesfai, Xiong, & Buekens, 2010). Women’s specific vulnerabilities to climate issues must be considered.

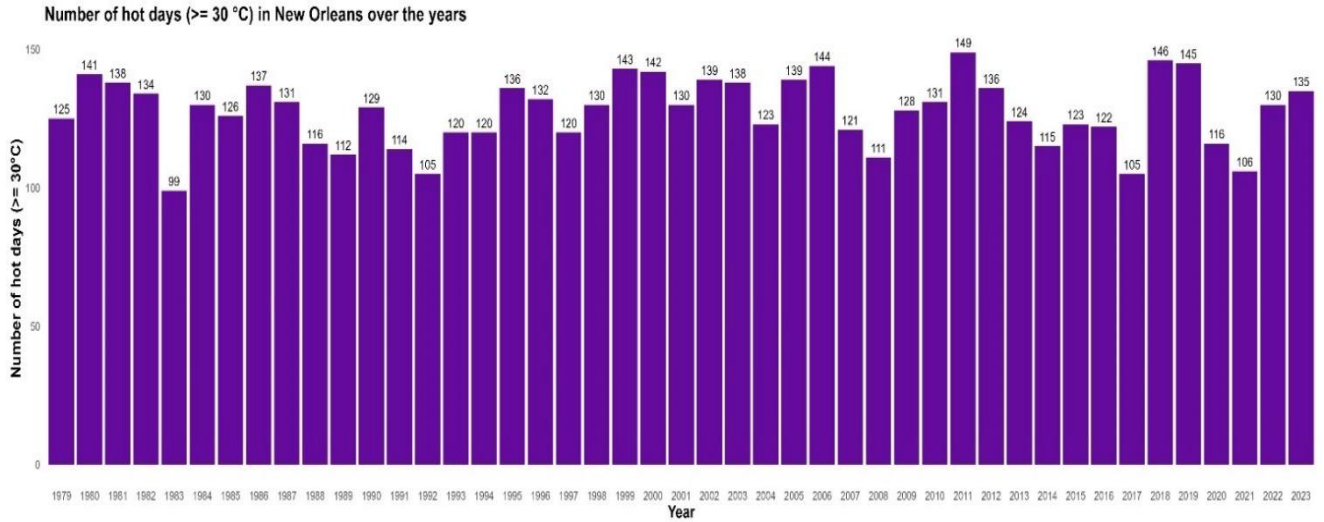


Figure 37. Days of High Heat in New Orleans by Year

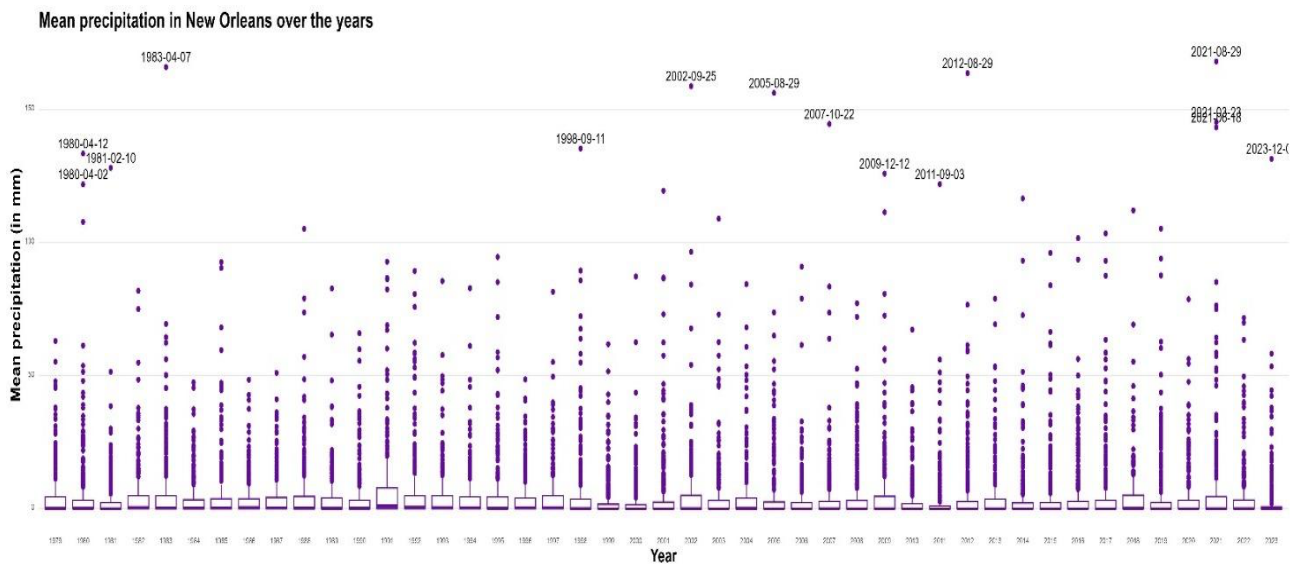


Figure 38. Mean Precipitation by Year in New Orleans

CONCLUSION AND IMPLICATIONS

This review of the state of women in New Orleans, via examination of demographic and health data as well as crime and climate data, offers important insight into the city and the status of women within the city. Women are vitally important to New Orleans and are the majority gender in the city, as they are in the state. The city remains large and thriving, with a population size of 376,971—the largest in the state. Education and employment have shown growth over the past decade, and today, more than two in every five adults in New Orleans hold a bachelor’s degree. There is a decline in the gender wage gap, which is lower in New Orleans than in Louisiana. Healthcare access has improved, and, corresponding with improved access and higher education, teen births and infant mortality have declined. The data also show a decline in violent crime and discriminatory policing and an increase in women in political leadership.

This progress is excellent and offers a solid foundation from which to build, but there are concerns that require attention. The population of New Orleans is experiencing a steady decline—simultaneously aging and having an inadequate in-migration to the city. The Hispanic population is the only population with an increasing working-age community. Further, advancements across the city are not being felt equally, and Black and Hispanic communities are disproportionately being left behind, as seen by the higher rates of poverty and STIs they face. This is a serious concern given that Black and Hispanic women are also more likely to have children under 5. Childcare needs for these women and for the city as a whole are substantial, with 60% of parents of young children concerned about having their family’s basic needs met in the context of increasing childcare costs. Housing costs are taking too much income from young, working families with children. While health care access has improved, poor and Black communities have the least access while they face a disproportionate burden of disease. IPV also remains a concern for the state, affecting more than half of all women, and this level of violence likely holds true for women in New Orleans, as well. Policing continues to affect poor, Black communities in low elevation areas disproportionately. Increasing climate risks for the city include increased frequency of high precipitation events (e.g., hurricanes), whose harms will disproportionately burden these same vulnerable communities.

Supporting women, particularly women with young children, and supporting the poorest communities, which are also often disproportionately Black, must be prioritized to strengthen the city. Black men and boys must also be considered as part of community strengthening given the disproportionate burdens in violence exposures and loss of education, as well as policing and unequal treatment in the criminal justice system (Hinton & Cook, 2021). Simultaneously, there should be a focus to build up employment opportunities across sectors for young adult residents, particularly the graduates of the many illustrious colleges and universities across the city, to ensure they do not move to other cities. Importantly, this means focusing on employment opportunities for college educated women, as women are the majority of students across higher education institutions today. At the same time, we need to support high school retention and completion, particularly for racial/ethnic minority males, as they are not benefiting from advancements in education we are otherwise seeing for the city as a whole.

Policy Implications

Based on the available data, the report offers the following five priority areas to support women in New Orleans and the city as a whole:

I] Prioritizing health care for Black and Hispanic women: Women of color face disproportionate rates of STIs, teen births, infant mortality rates and health care access. Efforts need to be made to understand the short fallings in the current healthcare system on New Orleans to better serve these populations

II] Making mothers a priority target group: Extensive evidence documents higher rates of maternal morbidity and mortality in Louisiana relative to other states in the U.S., with highest risk for these concerns seen among Black mothers. While healthcare access is greater for New Orleans than that seen for Louisiana as a whole, we still see important racial/ethnic disparities in maternal and child health. Hispanic women are increasingly represented among births in New Orleans, but their prenatal care utilization remains notably lower than that seen for White and Black women. Black women remain at significantly greater risk for infant mortality relative to all other groups. Childcare costs as a proportion of median income is increasing, and Black and Hispanic mothers remain most vulnerable to economic strains attached to these costs. Prioritization of maternal health and publicly funded childcare can support these mothers.

III] Attracting working-age populations to New Orleans: The population of both White and Black communities is aging, which directly reduces the working force of the city, threatening grave economic consequences. It is vital that the New Orleans government find ways to attract and retain younger, working age populations in the near future.

IV] Preventing IPV homicides: IPV homicides affect both women and men in New Orleans, Evidence-based programs should be adapted to the New Orleans context to prevent these gender-based crimes and provide the right support to families in need.

V] Supporting racial/ethnic minority men and boys: Improvements in higher education for women and for the city as a whole are not being seen for racial/ethnic minority men and boys. Further, these groups, particularly young black men and boys, continue to face greater risk for policing and violence. Community strengthening requires greater focus on these groups.

VI] Prioritizing climate change impacts: New Orleans is vulnerable to water-based adverse climate shocks. The narrative of “rebuilding” after such climatic shocks needs to change to one of building urban resilience. Relevant data linking climate variations to socioeconomic and health of the residents should be prioritized.

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