### **IACTE Conference**

**September 23, 2017** 



#### **Infant Mortality Defined**

The death of a baby before his/her first birthday

The Infant Mortality Rate (IMR) is an estimate of the number of infant deaths for every 1,000 live births

Large disparities in infant mortality in Indiana and the United States exist, especially among race and ethnicity

Infant Mortality is the #1 indicator of health status in the world









#### Infant Mortality in Indiana

- 613 Hoosier babies died before their 1st birthday
  - More than 50 babies EVERY month
  - Nearly 12 babies EVERY week
- More than 3,000 infant lives lost in the last 5 years
  - Nearly 42 school buses at maximum capacity



#### **Indiana's Infant Mortality**

Indiana is consistently worse than the U.S. and the national goal

- IN = 7.3 deaths per 1,000 live births
- U.S. = 5.9 deaths per 1,000 live births
- Healthy People 2020 Goal = 6.0 deaths per 1,000 live births

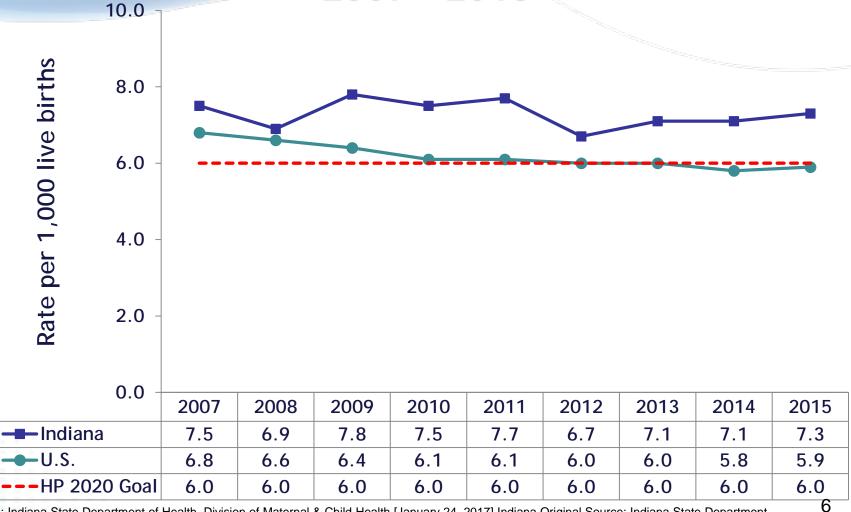


Black infants die 2.1 times more often than White infants in Indiana.

Indiana's rate of SUIDs deaths is typically worse than the national rate.

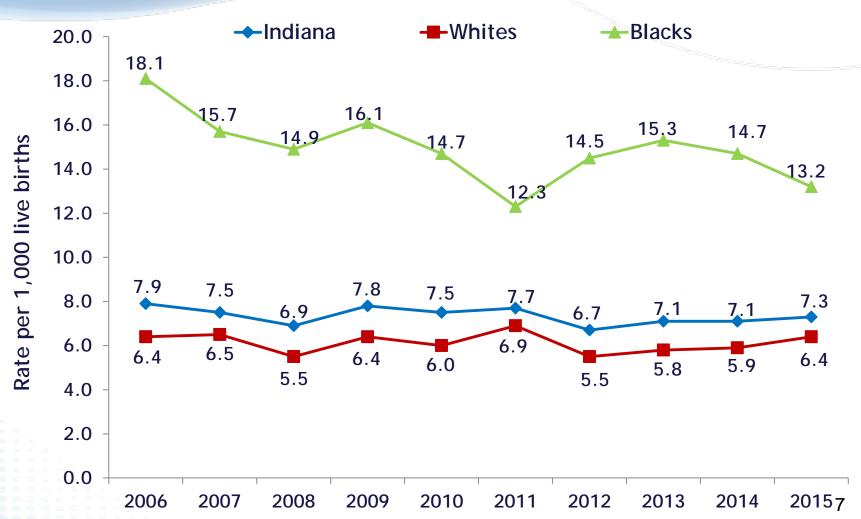
(https://www.healthypeople.gov/2020/)

# Infant Mortality Rates Indiana, U.S. and Healthy People 2020 Goal 2007 - 2015

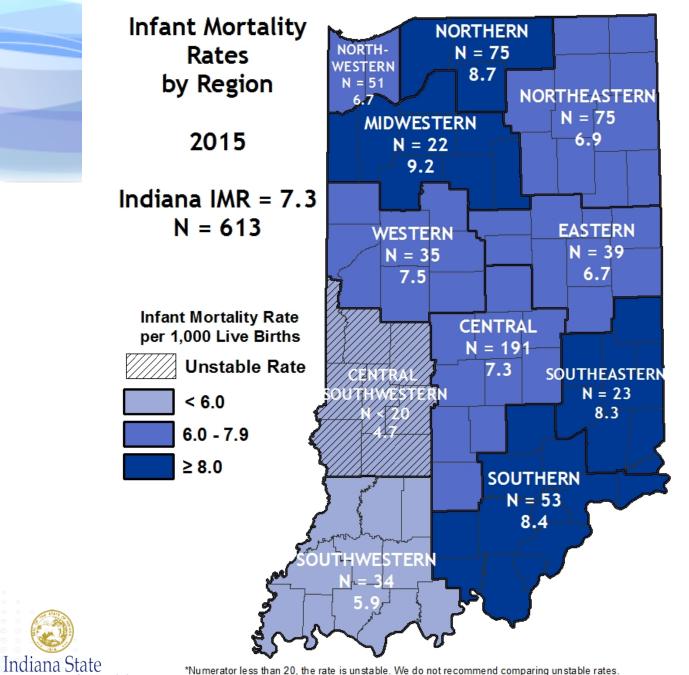


Source: Indiana State Department of Health, Division of Maternal & Child Health [January 24, 2017] Indiana Original Source: Indiana State Department of Health, Epidemiology Resource Center, Data Analysis Team

## Infant Mortality Rates by Race Indiana 2006 - 2015

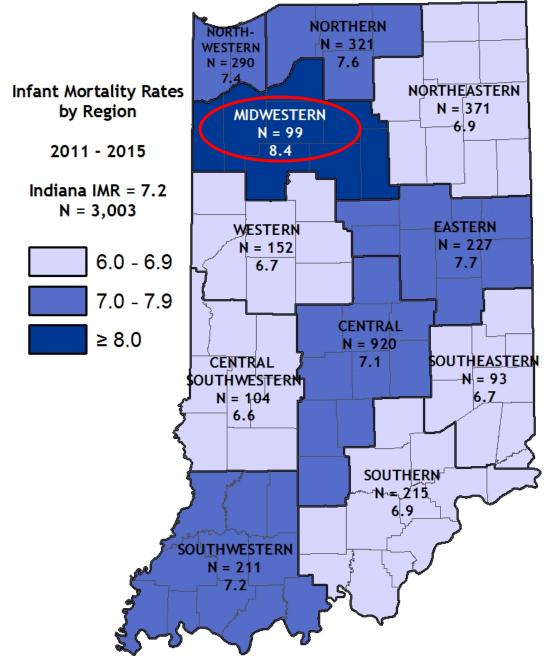


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Department of Health



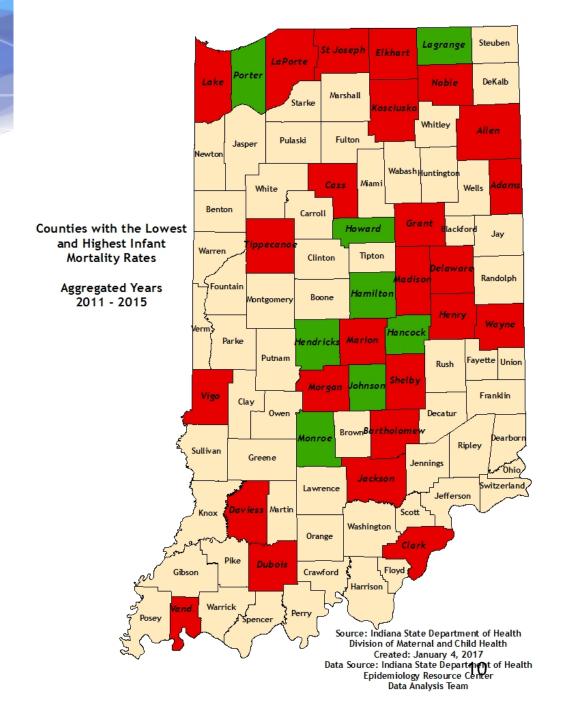




#### Infant Mortality Rates County Level, All Races 2011 - 2015

## HIGHEST Infant Mortality Rates in Indiana

- Bartholomew, 10.7
- Grant, 9.5
- Wayne, 9.0
- Daviess, 8.6
- Marion, 8.6
- LaPorte, 8.5
- Cass, 8.4
- Delaware, 8.4
- Henry, 8.4
- Lake, 8.3
- Shelby, 8.3
- Kosciusko, 8.1

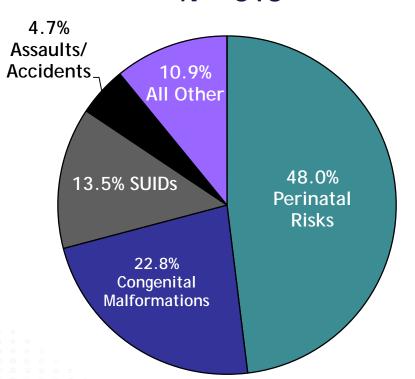


# Infant Mortality Cause of Death Category ICD-10 Codes

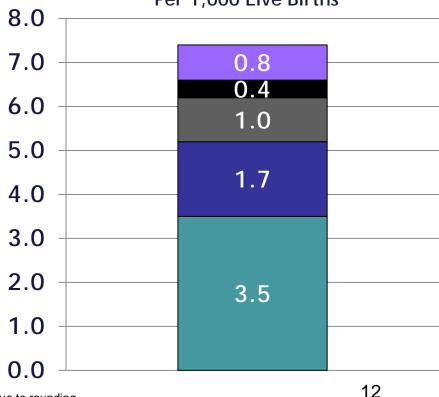
Cause of Death Category	Description	ICD-10 Code
Perinatal Risk	Certain conditions originating in the perinatal period (low birthweight, preterm, premature rupture of membranes, bacterial sepsis of newborn, etc.)	P00-P96
Congenital Abnormalities and Malformations	Physical defects present at birth that result from genetics, through exposure of the fetus to mal-forming agents, or are of unknown origin.	Q00-Q99
Sudden Unexpected Infant Deaths (SUIDs)	Sleep-related infant deaths and unexpected deaths of no known cause after investigation. Includes Sudden Infant Death Syndrome (SIDS) and accidental suffocation and strangulation in bed. (Centers for Disease Control and Prevention recommendation)	R95, R99, W75
Assaults and Other Accidents	Deaths related to homicide, neglect, and preventable accidents not included in SUIDs category (inhalation, ingestion, falls, motor vehicle accidents, etc.)	V01-W74, W76-W99, X00-59, X85-Y09, Y20, Y86
All Other Causes	Residual causes of deaths	Residual

# Infant Mortality Distribution by Cause Indiana 2015

# % Distribution of Infant Deaths N = 613



# Cause Specific Mortality Rates\* Per 1,000 Live Births



# Sudden Unexpected Infant Deaths (SUIDs) Accidental Suffocation / Strangulation in Bed (ASSB, W75)

- Mechanisms that lead to accidental suffocation include:
  - Suffocation by soft bedding
    - Pillow covers an infant's nose and mouth
  - Overlay
    - A person rolls on top of or against the infant while sleeping
  - Wedging or entrapment
    - An infant is wedged between two objects such as a mattress and wall
  - Strangulation
    - An infant's head and neck become caught between crib railings

#### Demographics of Mothers in Indiana

- Average age = 27.5 years (Range: 11 51)
- Education
  - 43.7% of mothers have a high school diploma or less
  - 20.9% of mothers have some college education, but no degree
  - 35.3% of mothers have a college degree (Associate's, Bachelor's, Master's, Ph.D.)
- Income = 43% of births were to women with Medicaid
- Marital status
  - 56% of mothers were married
- Average month prenatal care began = 3 (range: no care 9<sup>th</sup> month)
- Average number of prenatal visits = 12 (range: 0 49)
- 37.6% of all births were to first-time mothers
- 10% of all births were to foreign-born mothers
  - As high as nearly 25%



# Factors Contributing to Infant Mortality in Indiana

#### Obesity (ISDH #3 Priority)

- If woman is obese = 25% chance of delivering premature infant
- If woman is morbidly obese = 33% chance of delivering premature infant
- Indiana is 15<sup>th</sup> most obese state in U.S.

#### Smoking (ISDH #4 Priority)

- 14.3% of mothers smoke during pregnancy (TWICE the U.S. average)
- 24.7% of mothers on Medicaid smoke

#### Limited Prenatal Care

- Only 69.3% of mothers receive prenatal care during the 1st trimester

#### Unsafe Sleep Practices

13.5% of infant deaths in 2015 can be attributed to SUIDs



### **Smoking Risks**

- Preterm labor
- Ectopic pregnancy
- Vaginal bleeding
- Placental abruption and previa
- Oxygen deprivation in baby
- Birth defects
- Low birthweight (< 5 lbs., 8 oz.)</li>
- Sudden Unexplained Infant Death (SUIDS)
- Middle ear problems
- Lower respiratory problems



#### **Risks of Substance Abuse**

- Birth defects
- Problems with central nervous system
- Low birth weight
- Preterm delivery (< 37 weeks)</li>
- Slow growth and development
- Fetal Alcohol Syndrome (FAS)
- Learning disabilities
- Heart problems



## % Women Smoking During Pregnancy Indiana, U.S. and Healthy People 2020 Goal 2010 - 2015



#### **Smoking and Pregnancy**

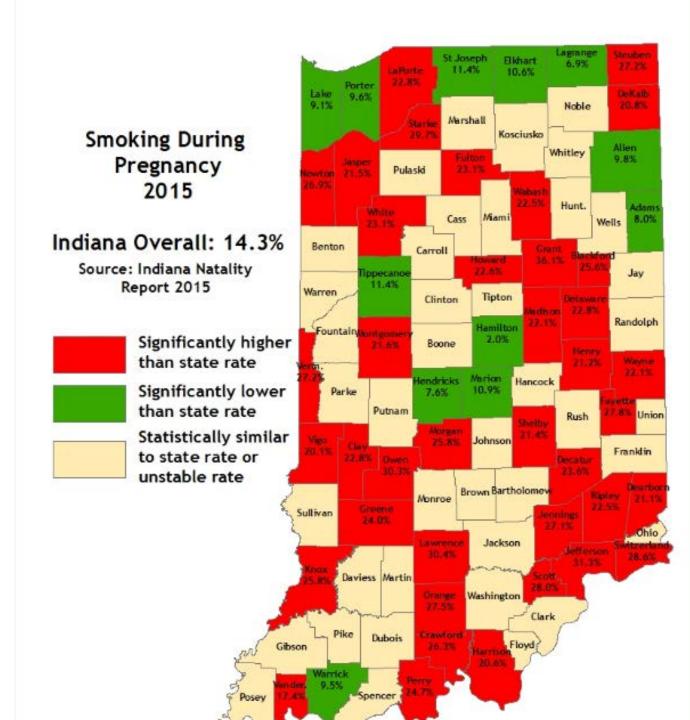
#### **Effects on Mothers:**

- Increases
  - Heart Disease
  - Stroke
  - Cancer
  - Absenteeism from work and school
- Reduces
  - Breastmilk supply
  - Energy and stamina to participate in daily activities
- Economic impact to family is significant and stresses resources

#### **Smoking and Pregnancy**

#### **Effects on Babies:**

- Increases
  - Premature birth
  - Low birthweight
  - Stillbirth
  - Risks of Sudden Infant Death Syndrome (SIDS)
  - Birth defects
- Reduces
  - Blood flow and oxygen to baby
- Risk of future health and behavioral problems



(Source: Indiana State Department of Health, Division of Maternal & Child Health [January 24, 2017] Indiana Original Source: Indiana State Department of Health, Epidemiology Resource Center, Data Analysis Team

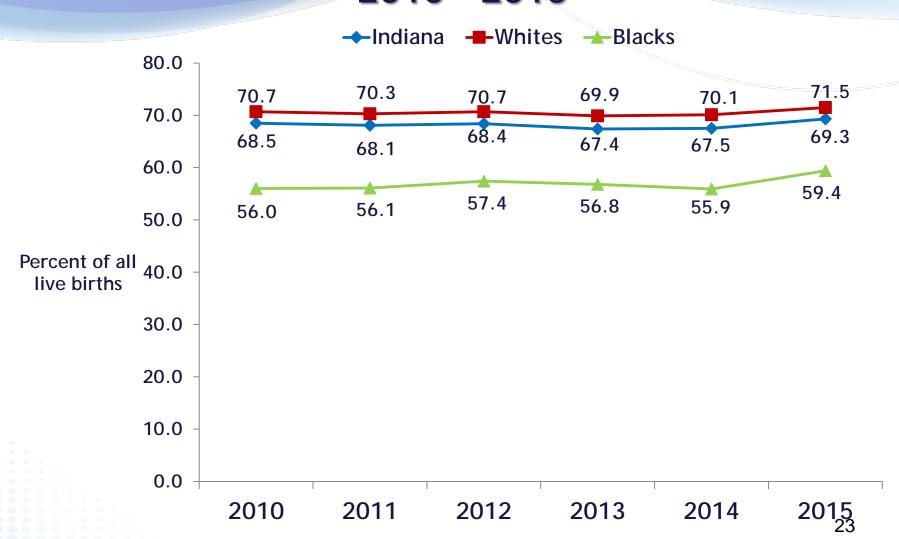


# Women Receiving Prenatal Care 1st Trimester Indiana, U.S. and Healthy People 2020 Goal 2010 - 2015



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# Women Receiving Prenatal Care 1st Trimester Indiana, by Race 2010 - 2015



### Women Breastfeeding at Hospital Discharge Indiana, U.S. and Healthy People 2020 Goal 2011 - 2015

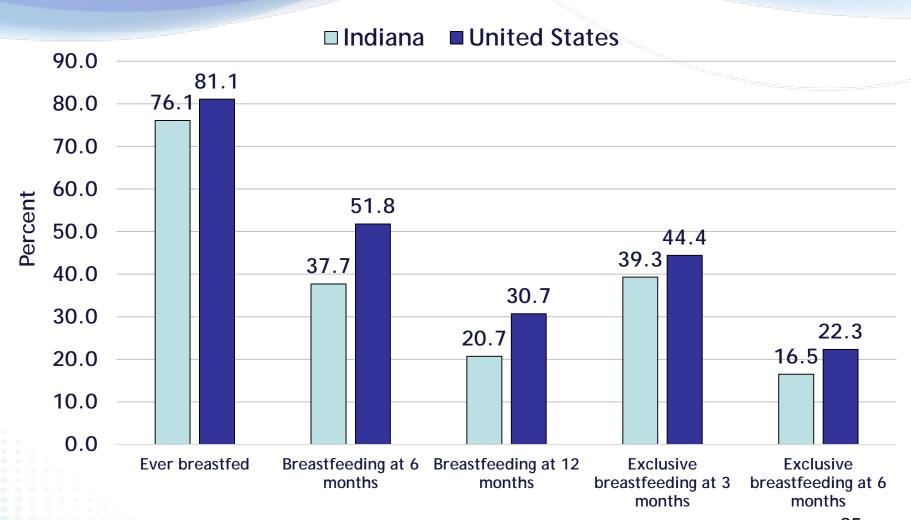


Source: Indiana State Department of Health, Division of Maternal & Child Health [January 24, 2017] Indiana Original Source: Indiana State Department of Health, Epidemiology Resource Center, Data Applying Team

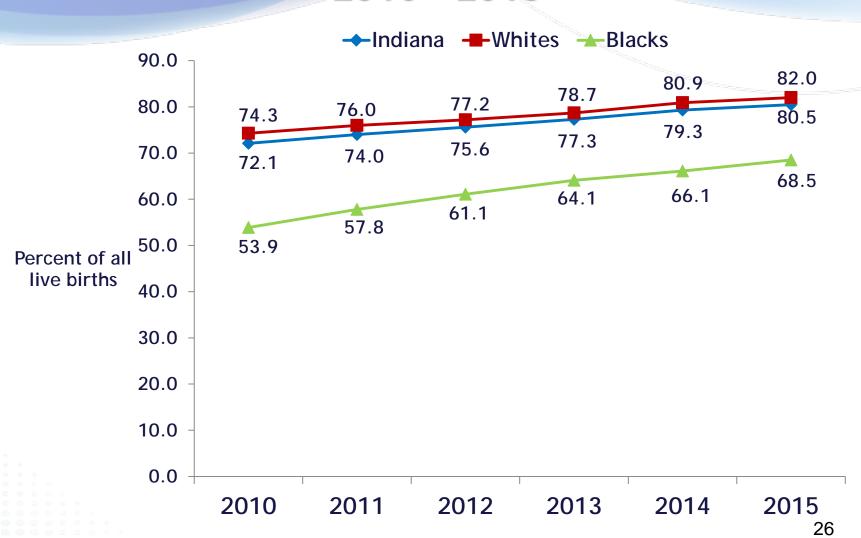
of Health, Epidemiology Resource Center, Data Analysis Team

# Breastfeeding Exclusivity and Duration Indiana and United States

\*based on 2013 births



### Women Breastfeeding at Hospital Discharge Indiana, by Race 2010 - 2015



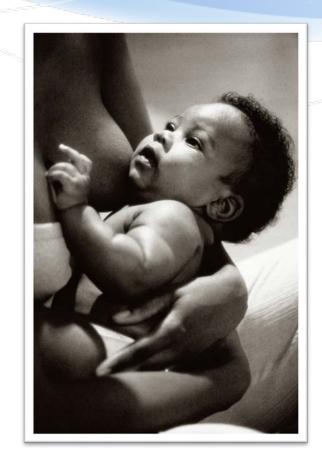
#### **Breastfeeding**

- 80.4% of all Hispanic mothers breastfeed for first 6 months
- 74.3% of all white mothers breastfeed for first
   6 months
- 54.4% of all Black mothers breastfeed for first
   6 months

If 90% of US families complied with medical recommendations to breastfeed exclusively for 6 months, the United States would save

- \$13 billion per year,
- Prevent an excess 911 deaths.

Decrease in Infant deaths would save \$10.5 billion and 741 deaths at 80% compliance.





## Age-Specific Birth Rates for Teen Mothers Indiana and U.S., Ages 15-19 2010 - 2015



#### Summary

- 613 infants in Indiana died before their first birthday
- Nearly 14% of infant deaths can be attributed to SUIDs
- Much higher percentage of women smoking during pregnancy when compared to the nation
- Lower percentages of women receiving early prenatal care and breastfeeding when compared to the U.S.
- Low birthweight, very low birthweight and preterm births are highest in *urban* counties
- Women smoking during pregnancy, not getting early prenatal care and not breastfeeding are most prevalent in rural counties
- Large disparities in all indicators make prevention efforts

  complex

  (Source: Indiana State Department of Health, Division of Maternal & Child Health [January 24, 2017]

## **ISDH Programs and Initiatives** To Help Reduce Infant Mortality Rates

















he key to a healthy baby and a happy mom



Neonatal **Abstinence** Syndrome (NAS) Survey



2015



Nurse-Family Partnership<sup>2</sup> Helping First-Time Parents Succeed

Source: http://www.in.gov/laboroflove/664.htm

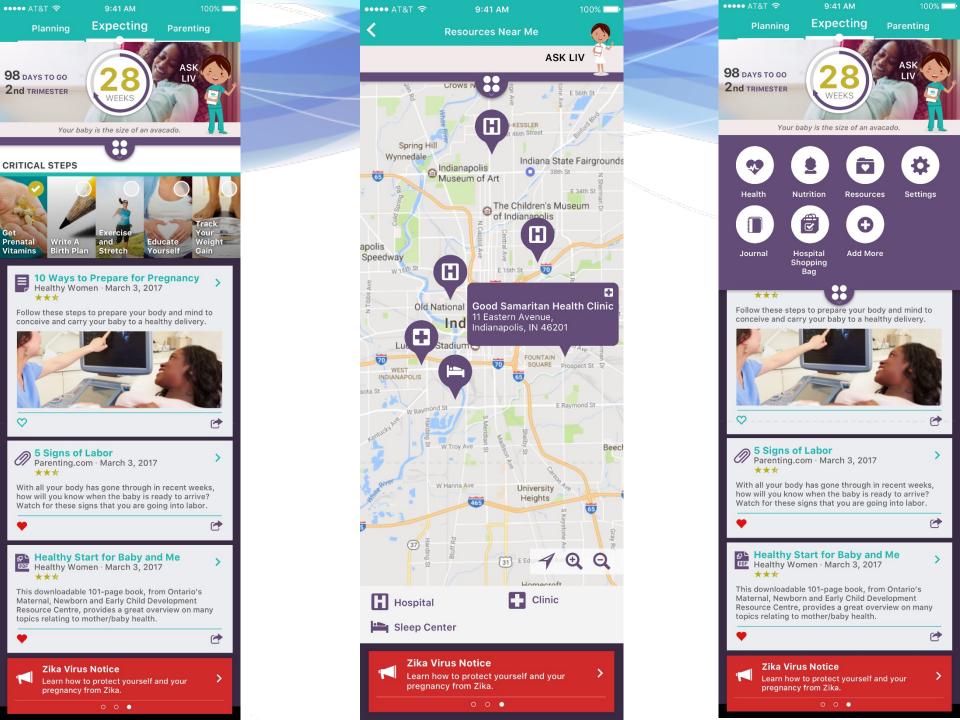


#### **Pregnancy Mobile Application**

- As part of the statewide efforts to reduce Indiana infant mortality rates, ISDH has contracted with Indianapolisbased technology solutions company eimagine to create and implement a pregnancy mobile application.
- The application will provide valuable health resources to parents, caregivers and to women of child bearing age that are pregnant or planning to be pregnant.
- The main goal is to improve the health of mothers and their children.
- Anticipated launch in September 2017.

Indiana State

Department of Health



## Contact

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