

Facts on Kids in South Dakota

Infant Mortality



Issue No. 1- 01

Introduction

This is the fifth in a series of **Facts on Kids in South Dakota**. Each issue takes a look at a specific indicator of child well-being. The focus of this issue is infant mortality.

Infant Mortality

Infant mortality is defined as the death of an infant before an infant's first birthday. It is an important measure of the well-being of infants and children. It can also provide important information on the health of the mother. Infant mortality is associated with a variety of factors, such as maternal health, quality of and access to medical care, socioeconomic conditions and public health practices.¹ The infant mortality rate is the number of deaths occurring to infants under one year of age per 1,000 live births.

Health problems of the infant or in the pregnancy account for two-thirds of infant deaths in the United States. Deaths in the first month of life after birth are usually the result of preterm delivery or birth defects. About one-third of infant deaths occur after the first month and these deaths can be influenced by social and environmental factors.²

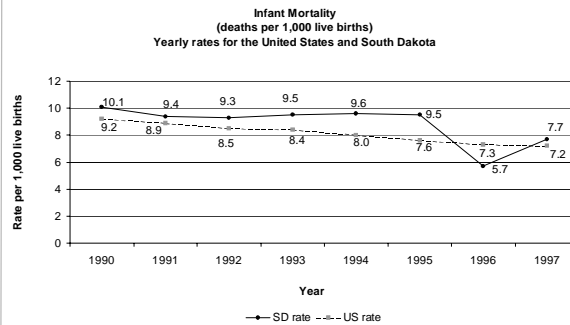
US vs. Other Industrialized Nations

According to the US Census Bureau (International Data Base), the infant mortality rate for the United States for 1998 was 6.89. While the rate shows a steady decline in the past ten years, it is still higher than many industrialized countries {see chart below}.

Rank	Country	Rate
1	Sweden	3.50
2	Iceland	3.60
3	Singapore	3.67
4	Finland	3.83
5	Japan	3.95
6	Norway	4.00
7	Andorra	4.09
8	Netherlands	4.47
9	Macau S.A.R.	4.52
10	Austria	4.53
39	United States	6.89

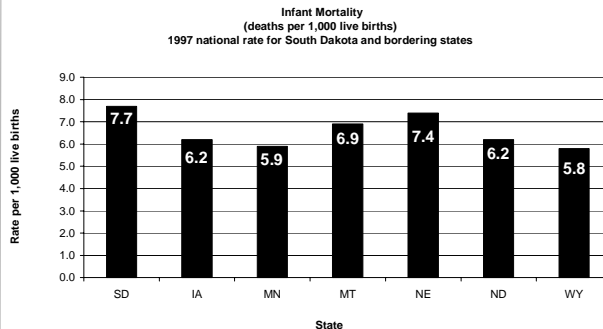
Rates in South Dakota vs. US

The infant mortality rate in South Dakota has paralleled the declining rate for the nation, but is slightly higher than the national average.



In the 2000 KIDS COUNT Data Book: State Profiles of Child Well-Being, published by the Annie E. Casey Foundation (based on 1997 data), South Dakota's infant mortality rate was ranked 34th out of 50 states (7.7 infant deaths per 1,000 live births). New Hampshire, ranked 1st, had the lowest rate (4.3 infant deaths per 1,000 live births).

For the states bordering South Dakota, infant mortality rates in 1997 ranged from 5.8 for Wyoming to 7.4 for Nebraska. For 1997, South Dakota's rate of 7.7 was the highest compared to bordering states.





Causes of Infant Mortality

Ten Leading Causes of Infant Mortality in the Nation

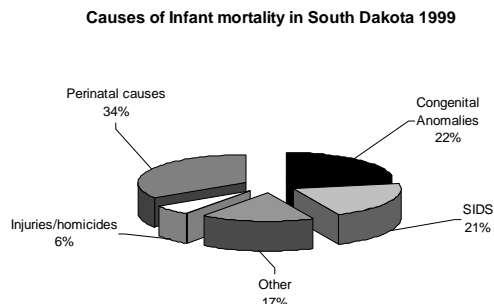
According to the National Vital Statistics Reports (June 30, 1999), the ten leading causes of infant death remain the same, but the number and rates of infant deaths have decreased. The following table shows the ten leading causes of infant mortality and the percent change for the years 1996 to 1997 and 1979 to 1997.

Cause of Death	Number	Percent of total deaths	Percent Change from	
			1996 to 1997	1979 to 1997
Congenital anomalies	6,178	22%	-2.9	-37.7
Preterm delivery and low birth weight	3,925	14%	0.8	1.1
Sudden Infant Death Syndrome (SIDS)	2,991	11%	-1.7	-49
Respiratory Distress Syndrome (RDS)	1,301	5%	-4.3	-78.6
Maternal pregnancy complications	1,244	4%	0	-30.8
Complications of placenta, cord & membranes	960	3%	1.2	-11.2
Infections specific to perinatal period	777	3%	3.1	-28.8
Accidents	765	3%	-4.8	-36.2
Intrauterine hypoxia & birth asphyxia	452	2%	5.5	-70.9
Pneumonia and influenza	421	2%	-15	-66.6

Source: National Vital Center for Health Statistics
National Vitals Statistics Reports, Vol 47, No. 19, June 30, 1999

State of South Dakota's Child: 2000³

According to the report State of South Dakota's Child: 2000 between 1997 and 1999, approximately one third of all infant deaths in South Dakota were due to perinatal causes. Nationally in 1998, about one half of all deaths in the first year of life were attributed to these causes: included in these deaths are those caused by short gestation and low birth weight. South Dakota compares similarly to national figures in the percent of deaths attributable to congenital anomalies. South Dakota, however, has a higher rate of infant deaths due to Sudden Infant Death Syndrome (SIDS). In the state, one in five infant deaths is due to SIDS, where nationally, only one in ten deaths are SIDS related. The chart below breaks out causes of infant mortality in South Dakota by percentage.



Nationally, analyses show that the increase in low birth weight can be attributed to increasing numbers of multiple births and to increases in the percent of these babies weighing less than 2,500 grams (5.5 pounds). Data from the past decade in South Dakota show that there have been increases in the percent of low birth weight noted among babies born from both single and multiple birth pregnancies. These data also suggests that perhaps with advances in prenatal care more pregnancies are reaching viability for the fetus, but lead to a delivery of a live, albeit low birth weight newborn.

Preventative Factors

Some factors that have been found to reduce the instance of infant mortality include:

- Quality prenatal care for pregnant women and pediatric care for infants after birth and throughout the first year;
- Healthy home environments, including adequate housing and proper sanitation practices;
- Education to: prevent Sudden Infant Death Syndrome (SIDS), prevent and treat birth defects, prevent neonatal drug addiction and AIDS;
- Child abuse prevention efforts providing parenting support services;
- Programs that educate caregivers about the dangers of shaking babies and provide constructive and safe ways to cope with crying and irritable babies.

What is Next?

Several programs and initiatives introduced by state and federal agencies address ways to reduce the rate and to improve overall health of infants. Some of these programs are:

Healthy Start Initiative

[www.healthystart.net/in00.htm]

This is a project, through the Department of Health and Human Services that:

- is committed to implementing innovative community-based interventions to support and improve perinatal delivery systems in project communities;
- focuses primarily on perinatal and infant clients and their families;

Facts on Kids in South Dakota

- strives to assure that every participating woman and infant gains access to the health delivery system and is followed through the continuum of care; and,
- provides strong linkages with the local and State perinatal system.

Healthy People 2010:

Healthy People 2010 is a national health promotion and disease prevention initiative. Its goals are to increase the quality and years of healthy life and eliminate health disparities. The website for Healthy People 2010 is: www.health.gov/healthypeople/

Initiative to Eliminate Racial and Ethnic Disparities in Health <http://raceandhealth.hhs.gov/>

State of South Dakota:

Bright Start Initiative is the Governor's new comprehensive early childhood initiative and it is composed of the following components:

- Home Visitation
- Newborn Hearing Screenings
- Early Intervention Screenings
- Immunizations
- Web Site - www.sdbrightstart.com
- Parent/Infant Welcome Box

Baby Care. This perinatal program provides the following services to improve pregnancy outcome:

- Risk assessment of pregnant women
- Case management of pregnant women found eligible by the risk assessment
- Genetic counseling
- Perinatal education
- Prenatal/postpartum visits
- Referral to community resources

Website:www.state.sd.us/doh/FamHlth/babycare.htm

South Dakota Coalition for Children



Steps to Reduce Infant Mortality

The tragic loss of an infant pulls at the heartstrings of us all. Many causes of infant death are beyond our ability to impact them. But there are some proactive steps we can take as parents, grandparents, and caregivers of babies to help them thrive. Remember these five essential steps for infant safety:

√ **Put babies to sleep ON THEIR BACK.**

While this practice goes against the old wisdom, research demonstrates that babies are better able to keep their breathing passages open when sleeping on their back. In the past, parents worried about a "flat head" developing but doctors are now saying that babies skulls will round out as they get older.

√ **Place babies on safe sleeping surfaces that are firm.** While pillows, comforters, and thick quilts can seem like a cozy spot for a baby, they are a hazard that may suffocate an infant.

√ **Eliminate secondhand smoke in the presence of babies.** Secondhand smoke can irritate breathing passageways and cause asthma.

√ **NEVER shake a baby**—this can cause severe brain damage and death.

√ **Always strap a baby in an infant car seat properly installed when traveling by motor vehicle.** Improperly restrained babies risk severe injury or death in motor vehicle accidents.

Facts on Kids in South Dakota



The South Dakota KIDS COUNT Project is a national and state-by-state effort, sponsored by the Annie E. Casey Foundation. By providing policymakers and citizens with benchmarks of child well-being, KIDS COUNT seeks to enrich local, state, and national discussions concerning ways to secure better futures for children and families. Additional funding for the state project comes from the South Dakota Departments of: Education and Cultural Affairs, Health, Human Services and Social Services. www.usd.edu/brbinfo

The Annie E. Casey Foundation - The Foundation's mission is to foster public policies, human service reforms, and community supports that more effectively meet the needs of today's vulnerable children and families. Working with neighborhoods and state and local governments, the Foundation provides grants to public and nonprofit organizations to strengthen the support services, social networks, physical infrastructure, employment, self-determination, and economic vitality of distressed communities. www.aecf.org

The South Dakota Coalition for Children (SDCC) is an advocacy organization that strives to shape policies and programs to ensure the well being of all children in South Dakota. The Coalition is composed of businesses, state and local organizations, and individual members. The SDCC is a member of the National Association of Child Advocates (NACA). SDCC, P.O. Box 2246, Sioux Falls, SD 57101-2246, phone: 605.367.9667. www.sdcchildren.org

The South Dakota Journal of Medicine is the official publication of the South Dakota State Medical Association, the South Dakota Chapter of the American College of Surgeons and the South Dakota Psychiatric Association of the American Psychiatric Association. The journal is published monthly by the South Dakota State Medical Association, 1323 South Minnesota Avenue, Sioux Falls, SD 57105. <http://med.usd.edu/sdsma/pubs.html>

Notes:

¹Kleinman, J.C. and Kiely, J.L. (1991) Infant Mortality. *Healthy People 2000 Statistical Notes*, 1 (2). Hyattsville, MD: National Center for Health Statistics.

²Centers for Disease Control and Prevention. (1995). Poverty and infant mortality, United States, 1988. *Morbidity and Mortality Weekly Report*, 44 (40), 922-927.

³South Dakota Journal of Medicine Vol 54. No. 1. Jan. 2001

Facts on KIDS in South Dakota

published by the South Dakota KIDS COUNT Project, Business Research Bureau, University of South Dakota. Written & Edited by Carole Cochran & Karen H. Dougherty
Proofreader: Pat Goebel

Special Thanks to:

Ann Wilson, PhD, USD School of Medicine
Susan Randall, PhD, Executive Director of the South Dakota Coalition for Children



SD KIDS COUNT Project
Business Research Bureau-USD
414 East Clark Street
Vermillion, SD 57069