



“Preparing for a Lifetime, It’s Everyone’s Responsibility” 2013 Snapshot

BACKGROUND

In May 2007, MCH convened the first meeting of the OSDH Commissioner's Action Team on Reduction of Infant Mortality. Over the next two years, internal and external partnerships expanded as work progressed in analyzing data and identifying priorities and strategies to impact infant mortality and racial disparities.

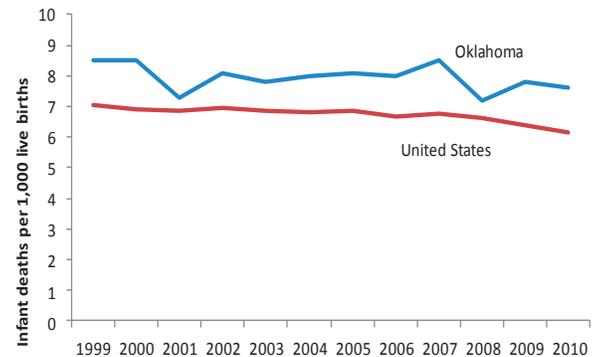
In September 2009, “Preparing for a Lifetime, It’s Everyone’s Responsibility,” Oklahoma’s statewide initiative focused on reducing infant mortality, was launched.

The statewide initiative focuses on priority areas identified through data as points for improving the health status of mothers and infants: preconception/interconception health; prematurity; postpartum depression; tobacco; breastfeeding; infant safe sleep; and infant injury prevention.

The three leading causes of infant death in Oklahoma are congenital malformations (birth defects), short gestation and disorders related to low birth weight, and Sudden Infant Death Syndrome (SIDS).¹

Rates of infant mortality are almost twice as high for African American infants and 1.5 times as high for American Indian infants, when compared to white infants.

Infant Mortality Rates 1999-2010: A Comparison of Oklahoma and the United States¹



Overall and Cause Specific Infant Mortality Rates in Oklahoma (IMRs)¹

Indicator	2007 Baseline Rate	2010 Rate	2010 Rate for United States
Overall Infant Mortality Rate (IMR)	8.5	7.6	6.1
IMR for Congenital Malformations (Birth Defects)	1.8	2.1	1.3
IMR for low birth weight and short gestation	1.2	1.1	1.0
IMR for SIDS	0.6	0.6	0.5



Technical Notes

Infant Mortality Rate =

Number of deaths before day 365 per 1,000 live births

Preterm Birth = Percentage of all live births less than 37 completed weeks gestation

Unintended Pregnancy =

Percentage of women with live births who indicated they wanted to be pregnant later or not at all when they became pregnant.

Kotelchuck Index =

Measures the ratio between expected and received prenatal care visits, also called Adequacy of Prenatal Care Utilization Index.

http://mchlibrary.info/databases/HSNRCPDFs/Overview_APCUIndex.pdf

AHT = Abusive Head Trauma, sometimes known as Shaken Baby Syndrome.

ACOG = American Congress of Obstetricians and Gynecologists

SIDS = Sudden Infant Death Syndrome

Data Sources

1. **National Center for Health Statistics (NCHS)**– Centers for Disease Control and Prevention (CDC)

2. **PRAMS**– Maternal and Child Health Service, Oklahoma State Department of Health (OSDH)

3. **Oklahoma Vital Statistics** – Health Care Information, OSDH

4. **HIV/STD Program Service Data**– OSDH

5. **TOTS**– Maternal and Child Health Service, OSDH

6. **Injury Prevention Service/Health Care Information**– OSDH

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Priority Area	Primary Measure	Baseline Data and Source	Current (data year)	Status
Preconception/Interconception	Percent of women receiving quality ACOG-recommended preconception care	Baseline not yet available ²	To be determined	-
	Rate of unintended pregnancies	48.0% (2007) ²	46.5% (2011)	
	Rate of prenatal care in the first trimester	67.2% (2009) ³	62.8% (2012)	
	Rate of identification and early treatment of maternal infections	92.5% (2008) ⁴	100.0% (2011)	
	Reduce the rate of births to teenagers ages 15-17	30.4% (2007) ¹	22.9% (2011)	
Prematurity	Rate of preterm births (<37 weeks gestation)	13.5% (2007) ¹	13.0% (2012)	
	Percent of pregnant women receiving adequate prenatal care as defined by Kotelchuck APNCU Index	70.9% (2009) ³	67.8% (2012)	
Tobacco	Percent of women who smoke in the last three months of pregnancy	21.3% (2007) ²	18.0% (2011)	
Postpartum Depression	Percent of women screened for postpartum depression up to two years after pregnancy	33.3% (2010) ⁵	40.6% (2012)	
Breastfeeding	Percent of mothers who breastfeed their infants at six months of age	30.2% (2007) ⁵	35.2% (2012)	
Infant Safe Sleep	Percent of infants who are put to sleep on their backs	62.7% (2007) ²	69.9% (2011)	
Infant Injury Prevention	Number of incidents of abusive head trauma in infants less than 12 months of age	37 cases (2007) ⁶	31 cases (2011)	

Increased in the Right Direction = 

No data available = -

Decreased in the Right Direction = 

Decreased in the Wrong Direction = 

SUMMARY

- From 2007-2010, the IMR in Oklahoma has decreased from 8.5 to 7.6.
- 9 of the 12 measures showed improvement in 2011 except the prenatal care measures. First trimester prenatal care decreased as did the percent of mothers receiving adequate prenatal care.
- New state funds were received in 2013 and 2014 totaling \$1.7 million, to support Oklahoma state infant mortality reduction.