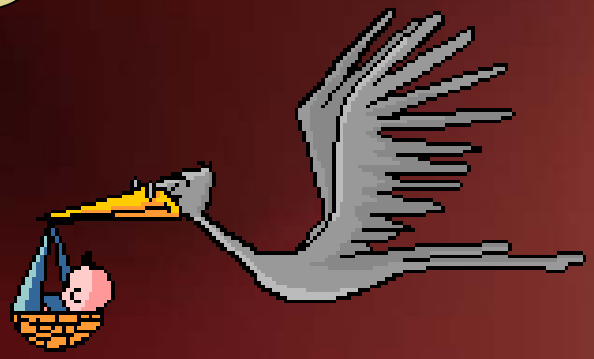
Infant Mortality, Our Trends



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Past, Present, and Future

Objectives

- **Identify the leading cause of infant mortality**
- **Identify at least 3 variables that increase the risk of prematurity**
- **Name 3 programs that are currently involved in reducing infant mortality**

Infant Mortality

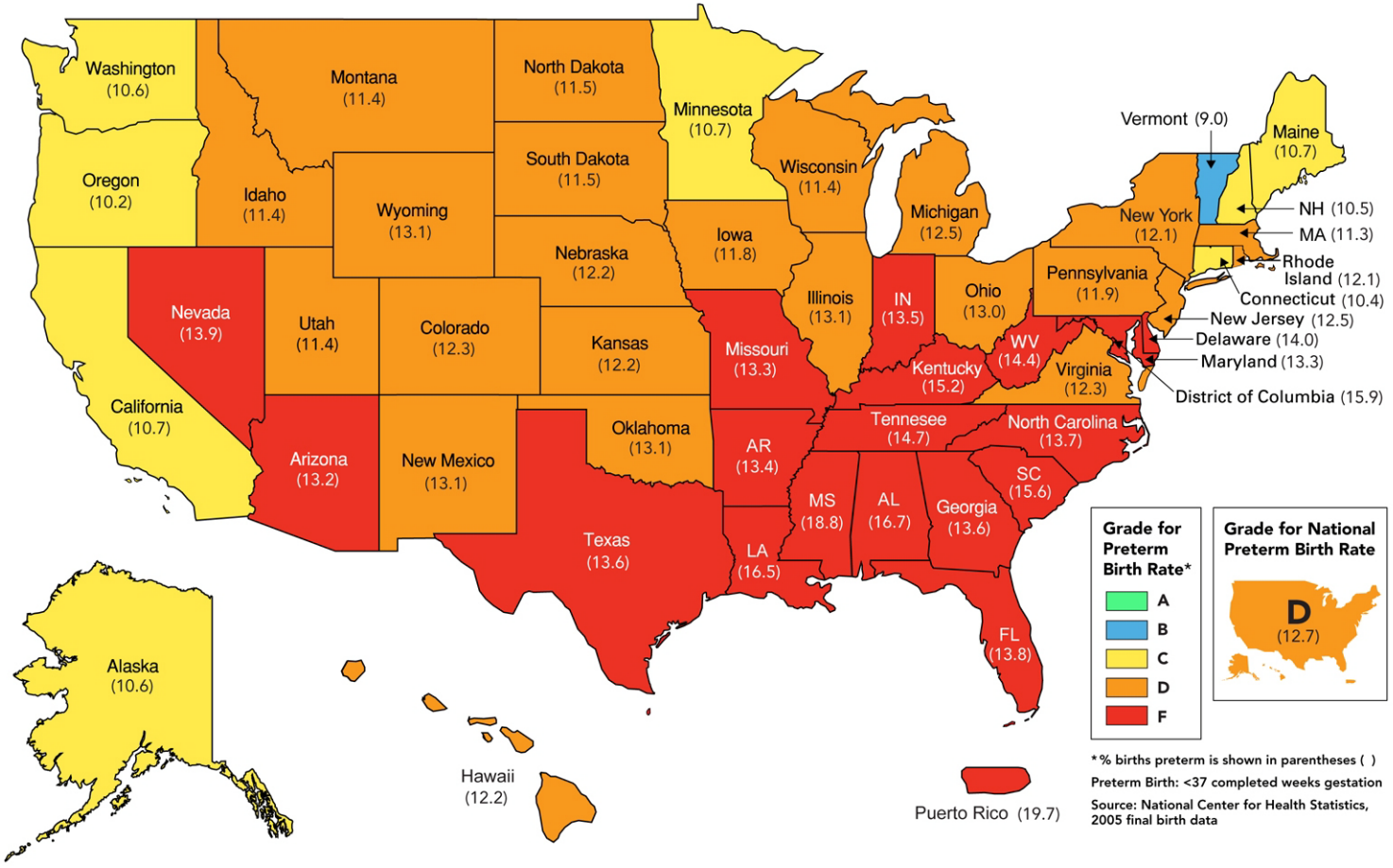
African American babies are dying

Identifying the Leading Cause of Infant Mortality

The Leading Causes of Infant Mortality

- **In first place is Prematurity**
  - **Normal pregnancy is 40 weeks or 10 months**
  - **Any baby born between 21 weeks and 36 weeks is premature**
    - **That is 5 months to 8 months**

2008 Premature Birth Report Card



*% births preterm is shown in parentheses ( )

Preterm Birth: <37 completed weeks gestation

Source: National Center for Health Statistics, 2005 final birth data

Infant Death and Mortality Rates Top 3 Leading Causes of Death (Preliminary 2006, per 1,000 births) African American

Cause of Death (by rank)	Number
Disorders related to short gestation and low birthweight	1,978
Congenital malformations, deformations, and chromosomal abnormalities	1,157
Sudden infant death syndrome	656

Office of Minority Health

Causes of Premature Labor

- **Medical**
  - **Previous preterm delivery**
  - **Misshapen uterus**
  - **DES (Diethylstilbestrol) daughter**
    - **(If your mother was prescribed this medication during her pregnancy to prevent miscarriage, you are considered a DES daughter. DES has been linked to shortened cervix.)**
  - **Abdominal surgery during pregnancy and/or cervical cerclage (a stitch in your cervix)**
  - **Previous Cone Biopsy or LEEP**
    - **(procedures used to diagnose and/or treat the cervix of women with abnormal PAP tests)**

Causes of Premature Labor

- **Medical, cont.**
  - **Carrying more than one baby**
  - **Dehydration**
  - **History of cervical change and/or excessive uterine contractions at <33 weeks in a previous pregnancy**
  - **Serious infections with fever (>101°F) during this pregnancy**
  - **Recurring bladder and/or kidney infections**
  - **Excessive amount of amniotic fluid**
  - **Unexplained vaginal bleeding after 20 weeks of pregnancy**

Causes of Prematurity

- **Lack of knowledge**
  - **Not knowing the signs and symptoms of preterm labor**
- **Low social and economic status**
- **Poor diet and nutrition**
- **Stress**
- **Risky behaviors**
  - **Alcohol, tobacco, drugs**
- **Infections**

Causes of Premature Labor

- **Psychosocial**
  - **Using recreational drugs**
    - **Such as cocaine or amphetamines**
  - **Domestic violence**
  - **Smoking more than 10 cigarettes per day**
  - **Extreme emotional or physical stress**

Current Programs Helping to Reduce Infant Mortality

- **Hollywood Healthloop and the Moses Community Coalition**

  - **Education / Tote Bag Distribution**
    - **Sponsored by a United Way Grant**
    - **Distribute 1,500 – 2,000**
    - **Include: Safe Sleep blanket, laminated resource list, baby t-shirt (This Side Up), baby thermometer**

    - **These bags are also distributed thru Healthy Start, Life Choices, and The MED and are a one-on-one teaching tool.**

Current Programs Helping to Reduce Infant Mortality

- **Hollywood Healthloop and the Moses Community Coalition**

  - **Prenatal Care Study**
    - **The Prenatal Care Study was developed to determine barriers to prenatal care and explore whether a prenatal van that went out into neighborhoods would be utilized. A survey is given to mothers who are 28+ weeks pregnant and present without any prenatal care at area hospital.**
    - **The study has started at the MED and Baptist Hospitals.**

Current Programs Helping to Reduce Infant Mortality

- **Hollywood Healthloop and the Moses Community Coalition**

  - **Spanish / English Classes**
    - **The original intent was to teach literacy to Spanish speakers who do not read or write in Spanish, however no prospective students responded. Permission was asked from the grantor and granted to reallocate the funds to providing two classes, one for English speakers who are interested in learning Spanish with a focus on Healthcare and the other for Spanish speakers who want to learn English. Healthcare will also be emphasized in the English class. The goal of both classes is to empower individuals to be able to access healthcare, especially pregnant mothers and children.**

Current Programs Helping to Reduce Infant Mortality

- **Hollywood Healthloop and the Moses Community Coalition**

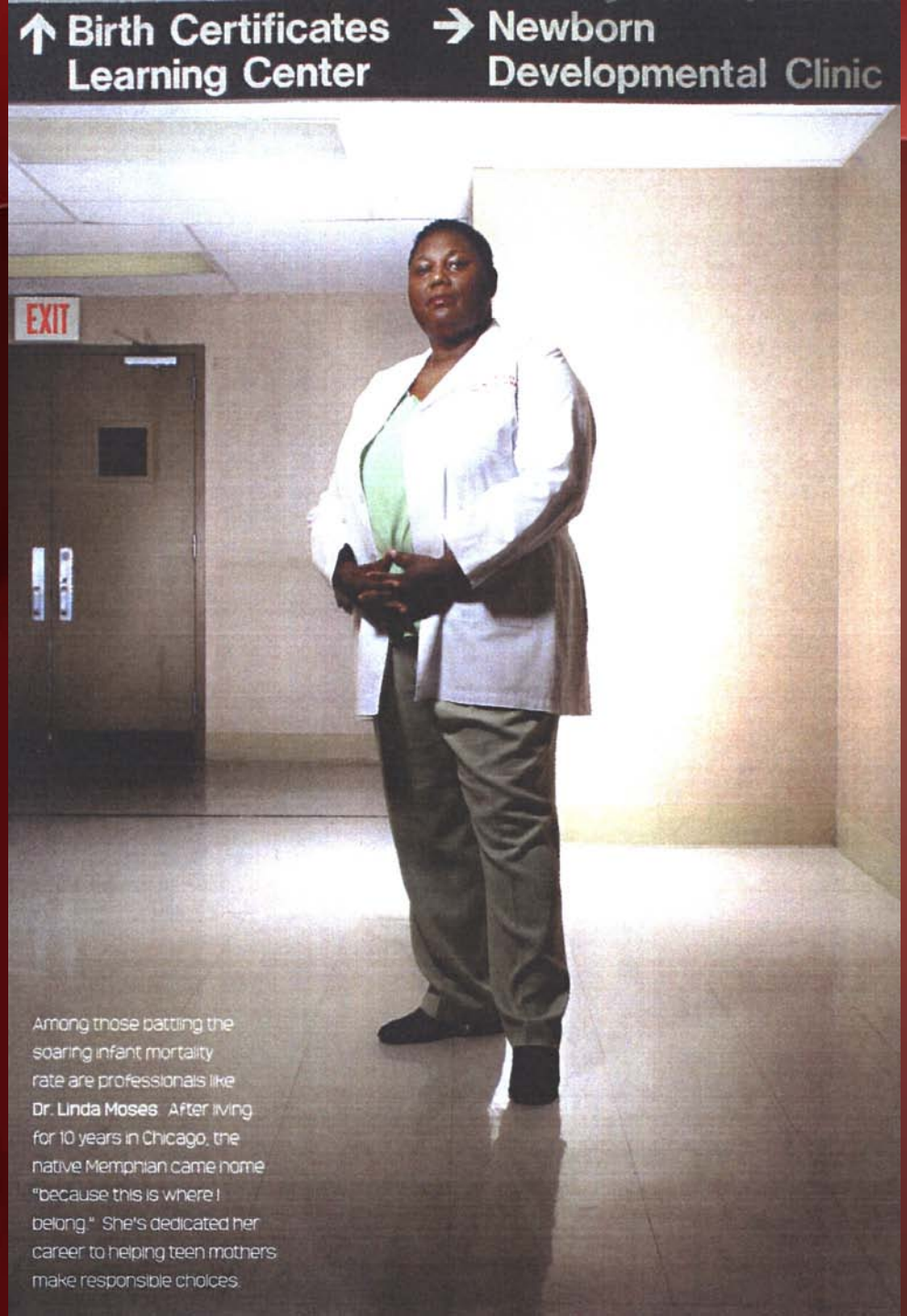
  - **GED Program**
    - **The Spring 2009 Session of the GED Program started off being better attended than the Fall 2008 session. There were a total of 36 classes offered this session, all on Tuesday and Thursday mornings at Hollywood Community Center. The first two classes were utilized to bring Messick Center staff in to administer the state required assessment that is now the first step in getting a GED. A total of 41 students, 22 females and 19 males, were enrolled with an average attendance for the 23 morning classes of 7.63 which was slightly better than the Fall attendance average of 7.52. The trend toward more young men enrolling and attending continued throughout the session.**
    - **Three Empowerment Seminars were held this quarter: February 10th, February 24th and March 10th and all topics centered around finances and job readiness.**

Current Programs Helping to Reduce Infant Mortality

- **OTHER PROGRAMS, to name a few**
  - **Community Voices**
  - **Centering pregnacy**
  - **The MED – Sunrise Program**
  - **LeBonheur Community Outreach**
  - **Shelby County Health Dept**
  - **Tendercare**
  - **United Way Success by 6**

The Past

The Present



Among those battling the soaring infant mortality rate are professionals like **Dr. Linda Moses**. After living for 10 years in Chicago, the native Memphian came home "because this is where I belong." She's dedicated her career to helping teen mothers make responsible choices.

Photo by Brad Jones
Memphis Magazine, April 2009

The Future

Resident physicians at
UT Health Science Center

Meet Memphis Guidebook, May 2009

Centering pregnancy

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- *Centering* is a model for delivery of health care that is on the forefront of health care system reform. The three components of care--

  - *assessment*
  - *education*
  - *support*

--are provided within a group facilitated by a credentialed health provider and a co-facilitator.

The *Centering* model outcomes include: empowerment and community building, increased satisfaction with care, reduction in preterm birth, and increased breastfeeding.

Challenges
Real People -- Real Problems