Preparing for a Lifetime,
It’s Everyone’s Responsibility
Infant Mortality in Oklahoma

- In Oklahoma, IMR 2016 is 7.4
- National rate is 5.9
- Healthy People 2020 target is 6.0
- Neonatal (<28 days) is 4.5
- Postneonatal (28–364 days) is 2.9

Sources: CDC Wonder, 2000–2015
Racial Disparities in Infant Mortality

- Infant Mortality Rate by race 2016
  - Black/African American – 13.9
  - American Indian – 9.7
  - Asian/Pacific Islander – 7.7
  - White – 6.1
  - Hispanic – 7.4*

*Persons of Hispanic origin can be of any race and are mutually exclusive from the other race categories.
Causes of Infant Death

The leading causes of infant death in Oklahoma:

- Congenital malformations
- Short gestation and disorders related to low birth weight
- Sudden Infant Death Syndrome (SIDS)
Response

- OSDH Commissioner’s Action Team
- External Partnerships
- Oklahoma Health Improvement Plan
- Targeted Interventions
Preparing for a Lifetime Partners

Coalition of Oklahoma Breastfeeding Advocates
Community Health Centers, Inc/Central Oklahoma Healthy Start Community
Family Expectations
Indian Health Services
Infant Crisis Services, Inc.
March of Dimes
Oklahoma Child Death Review Board
Oklahoma City Area Inter–Tribal Health Board
Oklahoma City–County Health Department
Oklahoma City Indian Clinic
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Oklahoma Department of Human Services
Oklahoma Department of Mental Health and Substance Abuse Services
Oklahoma Family Network
Oklahoma Health Care Authority
Oklahoma Hospital Association
Oklahoma Institute of Child Advocacy
Oklahoma Perinatal Quality Improvement Collaborative
Oklahoma State Department of Health and County Health Departments
Oklahoma Tobacco Settlement Endowment Trust
OU Medical Center
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Safe Kids Oklahoma
The Oklahoma City Indian Clinic
The Parent Child Center of Tulsa
The State Chamber
Tulsa Health Department/Tulsa Healthy Start
Turning Point Coalitions
University of Oklahoma Health Sciences Center OKC/Departments of OB/GYN and Pediatrics
Preparing for a Lifetime Statewide Initiative

- Web pages
  http://iio.health.ok.gov
- Public service announcements
- Educational materials
- Training for providers
- Hospital-based activities
Preparing for a Lifetime Statewide Initiative

- Preconception/Interconception Health
- Tobacco and Pregnancy
- Premature Birth
- Breastfeeding
- Postpartum Depression/
  Maternal Mood Disorders
- Safe Sleep for Infants
- Injury Prevention for Infants
Preconception health – aims to improve birth outcomes by promoting health of women prior to conception

Interconception health – health of women between pregnancies
Preconception/Interconception Health

- What women can do:
  - Know family health history
  - Live a healthy lifestyle
  - Make healthy food choices
  - Get regular health check-ups
  - Maintain emotional wellness & social support
  - Know health and pregnancy risks

- What others can do:
  - Support a woman’s healthy choices
Infections that Affect Pregnancy

Infections linked to:
• Ectopic pregnancy (tubal pregnancy)
• Preterm birth
• Low birth weight infant
• Pregnancy loss
Infections that Affect Pregnancy

What can women do:
• Wash hands often with soap and water
• Tell doctor if suspect urinary tract infection
• Prevent, test and treat, if needed, for STDs
• Get treated, if needed, for vaginal infections
• Talk to doctor about vaccinations
• Avoid people who have infections
Infections that Affect Pregnancy

What others can do:
• Wash hands often with soap and water
• Avoid pregnant women when sick
• Get tested and treated, if needed, for STDs
• Educate yourself
Smoking during pregnancy is one of the single most preventable causes of poor birth outcomes.

Smoking during pregnancy can result in:
- Pregnancy complications
- Premature birth
- Stillbirth
- Low birth weight infant
- SIDS
Smoking and Pregnancy

What women can do:
- Quit smoking before, during and after pregnancy (Oklahoma Tobacco Helpline 1–800–QUIT NOW)
- Avoid exposure to secondhand smoke

What others can do:
- Support a woman’s decision not to smoke
- Avoid exposing pregnant women, infants or children to secondhand smoke
Premature Birth

- A premature infant is born before the 37th completed week of pregnancy
- A full-term pregnancy lasts about
  - 40 weeks or
  - 280 days
Premature Birth

- Women at greatest risk for having a preterm birth:
  - Women who have already had a preterm birth
  - Women pregnant with more than one baby
  - Women with uterine or cervical abnormalities

But preterm birth can happen to anyone.
Premature Birth

What can women do:

- Learn if you are at increased risk
- Decrease chances of having a premature infant by:
  - quitting smoking and avoiding alcohol or drugs
  - planning the pregnancy
  - controlling diseases such as diabetes or high blood pressure
  - getting prenatal care
- Learn the signs of premature labor
Premature Birth

What others can do:

- Provide social and emotional support
- Support a pregnant woman’s healthy choices
- Learn the signs of premature labor
  - uterine contractions
  - cramps that feel like a period
  - low, dull backache
  - pelvic pressure
  - vaginal discharge
  - abdominal cramps
  - something’s not right
Breastfeeding decreases the incidence and/or severity of many infectious diseases

Breastfeeding may reduce risk for SIDS by 50% throughout infancy

Longer breastfeeding is associated with lower health risks
Breastfeeding

What women can do:
◦ Breastfeed as soon as possible after infant is born within the first hour of life
◦ Breastfeed infant for 1 year or beyond for optimal health benefits
◦ Call 1–877–271–MILK (6455) for help
◦ Visit http://bis.health.ok.gov

What others can do:
◦ Support a woman’s decision to breastfeed
◦ Become a Breastfeeding Friendly Worksite
Depression can affect a mother’s role in raising children:
- Disrupts parent–child bonding
- Depressed mothers less likely to engage in safe and healthy parenting practices

Depressed mothers are more likely to:
- Miss routine pediatric and well–child visits
- Use emergency room as routine source of care for children
- Smoke cigarettes
Postpartum Depression / Maternal Mood Disorders

What women can do:
- Learn the factors that increase risk
- Learn symptoms of postpartum depression
- Get help from a health care provider or mental health professional

What others can do:
- Learn symptoms of postpartum depression
- Offer support and hope
- Screen for depression
- Establish community links for referrals
Safe Sleep

- SIDS is a leading cause of death of infants up to one year of age.

- In addition to SIDS, infants are at increased risk of dying when put down to sleep in an unsafe sleeping space.
Safe Sleep

What women can do:

- Place infant on his/her back to sleep
- Talk to all caregivers about “back to sleep”
- Do not smoke or allow smoking around infant
- Place infant in his/her own separate, safe sleep area
- Place infant in a safety-approved crib with a firm mattress and well-fitting sheet
- Keep soft objects and loose bedding out of crib
- Do not cover infant’s head with blankets
- Have supervised “tummy time” for infant who is awake
Safe Sleep

- What others can do:
  - Place infant on his/her back to sleep
  - Do not expose infant to cigarette smoke
  - Place infant in a safety-approved crib with a firm mattress and well-fitting sheet
  - Place infant in his/her own separate, safe sleep area
  - Keep soft objects and loose bedding out of crib
  - Do not cover infant’s head with blankets
  - Have supervised “tummy time” for infant who is awake
Infant Injury Prevention

- Unintentional suffocation is a leading cause of injury deaths for children less than one year of age.

- Unintentional injuries (accidents) are also a leading cause of infant death.

- Number of abusive head trauma cases continues to be a problem.
Infant Injury Prevention

What women can do:
- Get ready for the new arrival
- Follow doctor’s advice, especially for preterm infants
- Never shake a infant!!!
- Install car safety seats correctly
- Keep infant safe around water
- Keep environment safe for infant
- Never leave infant unattended
Infant Injury Prevention

- What others can do:
  - Never shake a infant
  - Install car safety seats correctly
  - Report child abuse if you suspect it
    Child Abuse Hotline (1-800-522-3511)
  - Keep infant safe around water
  - Keep environment safe for infant
  - Never leave infant unattended
  - Provide support for families
  - Refer families to community resources
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References

- Centers for Disease Control and Prevention, Protect yourself and your partner, CDC Pub No. 99–8825
- National Institute of Child Health and Human Development, Safe sleep for your baby, NIH Pub. No. 05–7040.
References

- OSDH, Center for Health Statistics, Health Care Information, Vital Statistics 2016 OK2SHARE.
- OSDH, Maternal and Child Health Service, PRAMSGRAM, Vol. 9, No. 4, 2006