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Ohio’s Infant Mortality Rate Moves In Positive Direction

2014 Data Shows Improving Trend, However More Work Remains

COLUMBUS – Ohio’s infant mortality rate is showing signs of improvement, according to 2014 data issued by the Ohio Department of Health (ODH) which indicates a decline in the overall infant mortality rate from 7.4 infant deaths per 1,000 live births in 2013 to 6.8 in 2014. While data continues to trend in a positive direction overall, Ohio’s infant mortality rate – especially the black infant mortality rate – remains too high.

“While we are encouraged by the trends, there is much work to do – especially when it comes to African-American infants who die at more than twice the rate of white infants. We are optimistic that our recent initiatives will help us accelerate our progress,” said ODH Director Rick Hodges. “Given the importance of this issue, we sped up the process of collecting and analyzing data to provide the annual infant mortality report several months earlier than in past years in order to help our many partners who are on the front lines in the fight to save babies’ lives.”

Infant mortality is defined nationwide as the death of a live-born baby before his or her first birthday. Infant mortality rate is calculated as the number of such deaths per 1,000 live births. Ohio’s goal is to reach the Healthy People 2020 objective of a 6.0 infant mortality rate or lower in every race and ethnicity group. Healthy People 2020 is a national collaborative managed by the U.S. Department of Health and Human Services that provides science-based, national objectives for improving the health of Americans.

The number of infant deaths in Ohio declined nearly 6.7 percent from 1,024 in 2013 to 955 in 2014, marking the first time since deaths were registered in Ohio beginning in 1939 that the state had fewer than 1,000 infant deaths in a year. The three leading causes of infant deaths in Ohio are prematurity/ pre-term births, sleep-related deaths and birth defects.

Ohio Infant Mortality Rate (Number of Infant Deaths per 1,000 Live Births)

	<u>2014</u>	<u>2013</u>
OVERALL (ALL RACES)	6.8	7.4
RACE		
White	5.3	6.0
Black	14.3	13.8
ETHNICITY		
Hispanic	6.2	8.8

“Ohio is taking a statewide, coordinated approach to address the many factors contributing to infant mortality. As that work continues to make inroads, more Ohio babies will celebrate their first birthdays,” Hodges said.

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The 2014 report on Ohio's infant mortality data, including by county, is available [here](#) and on the website "odh.ohio.gov."

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Chronology of Key Infant Mortality Initiatives

A more comprehensive list of Ohio's infant mortality initiatives, including more details about the key initiatives below, is included in the infant mortality report. A visual timeline of key infant mortality initiatives is available [here](#) and on the ODH website.

2011: Gov. Kasich addresses infant mortality in Ohio in his first State of the State Address and makes reducing low birth-weight babies a priority.

2011: The Governor's Office of Health Transformation and other state agencies initiate a comprehensive package of reforms to improve overall health system performance for pregnant women and infants.

2012: ODH, as a member of the Ohio Collaborative to Prevent Infant Mortality, publicly releases for the first time Ohio's infant mortality data with the goal of raising public awareness.

2012: ODH and the Ohio Collaborative to Prevent Infant Mortality host the first biennial statewide Infant Mortality Summit with more than 900 attendees.

2013: The 2014-15 state budget includes funding to develop protocols for incorporating progesterone treatment into clinical practice to reduce prematurity/pre-term births, the leading cause of newborn illness and mortality.

2013: The Progesterone Quality Improvement Project launches to improve birth outcomes for Medicaid recipients by encouraging wider use of progesterone treatment.

2013: The 2014-15 state budget includes funding to expand women's access to providers with tools and training to assist them to quit smoking, one of the most common preventable risk factors for infant mortality.

2013: In response to rising prescription drug abuse, including by pregnant women, the state launches the Maternal Opiate Medical Support Project (MOMS) to link such pregnant women with treatment.

2013: The 2014-15 state budget includes funding to educate parents, caregivers and healthcare providers about the ABCs of safe sleep practices. Babies should be placed Alone, on their Back, in a Crib.

2013: ODH partners with a national organization that supports urban maternal and child health initiatives at the local level to launch the Ohio Institute for Equity in Birth Outcomes to improve birth outcomes and reduce disparities in infant mortality. The partnership includes nine Ohio metropolitan communities.

2013: Gov. Kasich signs Senate Bill 4 into law, requiring hospitals and freestanding birthing centers to screen all newborns for Critical Congenital Heart Disease for early diagnosis and treatment.

2013: The Ohio Department of Medicaid negotiates new contracts with Medicaid managed care plans to include enhanced maternal care for women at highest risk for poor pregnancy outcomes.

2013: The Ohio Department of Medicaid promotes better birth outcomes by holding Medicaid managed care plans accountable for minimum performance standards on related measures.

2014: Medicaid benefits are extended to more low-income Ohioans, including women of child-bearing age, with better access to medical care which is associated with better birth outcomes.

2014: ODH and the Ohio Collaborative to Prevent Infant Mortality host the second biennial statewide Infant Mortality Summit with more than 1,700 attendees. Gov. Kasich tells audience that Ohio's infant mortality rate is "simply unacceptable" and announces new initiatives to focus support and resources.

2014: Gov. Kasich signs into law House Bill 394, creating a Commission on Infant Mortality.

2014: The Ohio General Assembly passes Senate Bill 276, establishing the Safe Sleep Education Program to be administered by ODH.

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2014: Ohio Institute for Equity in Birth Outcomes teams review local data with their communities and use it to select evidence-based interventions to address highest risk populations in targeted areas.

2015: The 2016-17 state budget continues funding to support raising public awareness about infant safe sleep practices.

2015: The Ohio Collaborative to Reduce Infant Mortality releases a 2015-2020 infant mortality reduction plan.

2015: Ohio Institute for Equity in Birth Outcomes teams launch evidence-based interventions to address highest risk populations in targeted areas, and collect data for evaluation.

2015: ODH partners with The Paul J. Aicher Foundation and its Everyday Democracy Program to support Ohio Institute for Equity in Birth Outcomes teams in enhancing community engagement in addressing infant mortality.

2015: ODH launches a public awareness campaign to raise awareness about infant mortality in high-risk communities targeted by Ohio Institute for Equity in Birth Outcomes teams.

2015: ODH launches a redeveloped birth defects information system, a web-based application used by hospitals to report cases of birth defects in Ohio. Data will be used to shape birth defects prevention strategies.

2015: ODH selects four community health centers in high-risk communities around the state to pilot an evidence-based healthcare delivery model for pregnant women called "Centering Pregnancy" to improve birth outcomes.

2015: ODH contracts with The Ohio State University Wexner Medical Center to provide obstetric emergency simulation training for hospital and birthing center labor and delivery, and postpartum unit staff in Ohio hospitals.