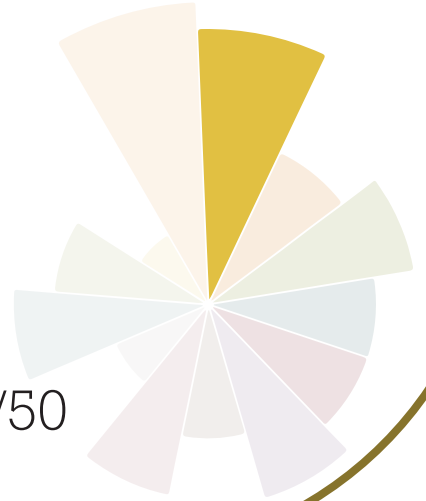


Infant Mortality



OHIO'S
U.S. RANKING²

41/50



Infant mortality is a bellwether or indicator of conditions¹ in a community that lead to the deaths of babies before they reach one year of age. In Ohio, those at most risk for infant mortality are African-American or Black Ohioans. According to the Health Policy Institute of Ohio, additional risk factors include low levels of educational attainment, low incomes, and living in one of Ohio's 'hot spot' communities. Hot spot communities are those in densely populated urban areas or rural counties.² The disparity between white infant mortality rates and Black infant mortality rates tells an alarming story. Black babies die at a rate nearly 75% higher than white babies. Why? Toxic environmental stress Black mothers endure as well as systemic racism and sexism couple to cause harm to vulnerable Black babies.³ Neighborhood poverty and diminished economic opportunities⁴ are risk factors for intimate partner violence and intimate partner violence is a risk factor for negative birth outcomes.⁵

Causes of Infant Mortality

The five leading causes of infant mortality in 2018 were:⁶

- 1** Birth defects
- 2** Preterm and low birth weight
- 3** Maternal pregnancy complications
- 4** Sudden infant death syndrome (SIDS)
- 5** Injuries (e.g. suffocation)

Many of the causes of infant mortality are linked to the social determinants of health such as economic conditions and access to healthy food.⁷ In addition, racism and other inequities experienced by African Americans have been pointed to as a cause of infant mortality in Ohio.⁸ Economic conditions and safe supportive communities are also factors associated with intimate partner violence perpetration and victimization.

Infant mortality rate
overall in Ohio:

6.9

infant deaths per 1,000 live births

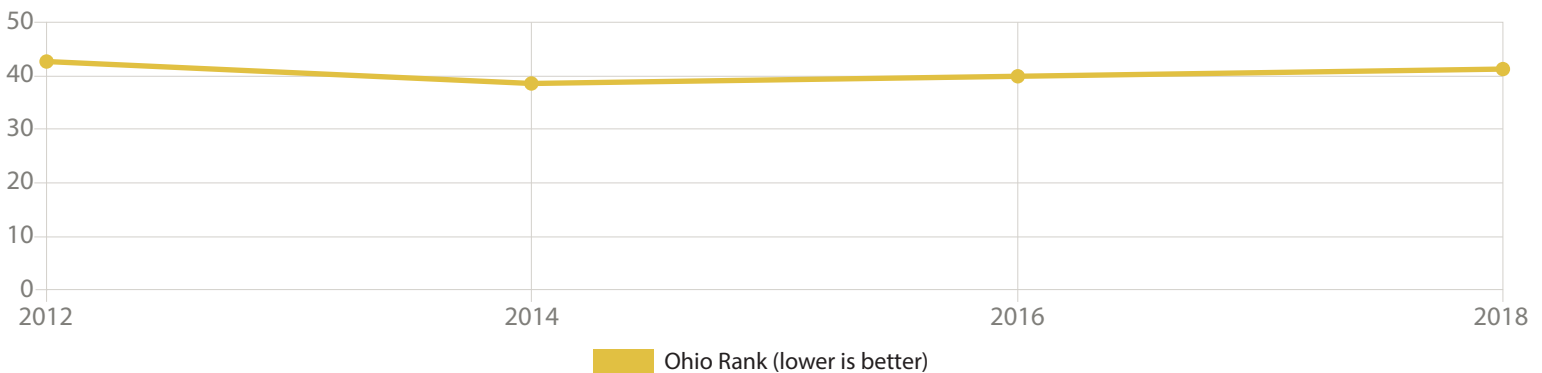
Rates by Race (per 1,000 live births)



Barriers to Decreasing Infant Mortality

- Nationally, the rate of preterm birth among African-American women was nearly 50% higher than the rate for white or Hispanic women.⁹
- In the US and Ohio, babies weighing under a pound and after only 21 weeks of gestation are considered born rather than stillborn. This likely contributes to high rates of infant mortality.¹⁰
- Prenatal and postnatal care for low income women and women who do not have health insurance contributes to negative birth outcomes.
- Lack of culturally appropriate or competent healthcare providers who represent those they serve since most physicians in the system are white.¹¹

Ohio's Ranking of Infant Mortality



Remedies for Decreasing Infant Mortality

- Raise awareness among healthcare providers about racial and ethnic disparities and how those disparities¹² effect health outcomes.
- Prevent birth defects, pre-term and low birth weight babies by providing economic supports for families, especially those at most risk in Ohio for infant mortality.
- Efforts to declare racism a public health problem in Ohio communities and for Ohio could spark efforts to decrease infant mortality among Black babies and families by elevating infant mortality as a public health crisis that is a result of systemic racism and associated toxic stress.
- Access to reproductive healthcare would go a long way to improving Ohio's (and the US) infant mortality rate.
- Home visiting programs are an evidence-based practice whereby trained professionals and paraprofessionals who are community members visit new mothers in their homes prior to birth and up to a year after birth. Home visitation provides support, resources, and screens for domestic violence. Adopting this practice widely across Ohio is one remedy to reduce infant mortality.
- Organizations such as Restoring Our Own Through Transformation (ROOTT) provide Black women with Full Spectrum Doula services to help them access myriad perinatal support and birthing justice, which decreases negative birth outcomes.¹³