

Allen County Infant Mortality Report



To Reduce Infant Mortality in Allen County

For every 1,000 babies born in Allen County, 6 infants die before their first birthdays. Our littlest community members — and their families — are counting on us to help them lead happy, healthy lives. But before we can do that, we must understand the mental, physical, social and financial determinants that stand in their way. Only then, can we meet them where they are, and be the right resource, for the right person, at the right time. Healthier Moms and Babies conducted the Infant Mortality Study to understand how our community can better support our most vulnerable residents.

In the United States, the infant mortality rate is 5.4 (5 infants die before their first birthdays for every 1,000 babies born). But those rates only get worse closer to home. Indiana's infant mortality rate is 6.6 — and Allen County's is 6.9. Allen County is also home to the zip code with the sixth-highest infant mortality rate in all of Indiana. **Of every 1,000 babies born in the 46806-zip code, 11 infants die before their first birthdays.**

Many factors contributing to our community's high infant mortality rate are preventable through healthcare, education and programming.

Leading Causes of Infant Mortality

Pre-term Birth
Congenital Anomalies
Sleep Incidents

Infant Mortality Rates

The infant mortality rate is the number of infant deaths for every 1,000 births.

United States	Indiana	Allen County	Allen County Black Residents	46806
5.4	6.6	6.9	15.2	11.4

Sources: Centers for Disease Control and Prevention 2020 Infant Mortality Rates by State; Indiana Department of Health, Maternal & Child Health Epidemiology Division; Indiana Department of Health, Vital Records, ERC, Data Analysis Team

Struggling with Mental Health

Mental health is a significant issue amongst survey respondents. Nearly half of survey respondents indicated they could not handle life's ups and downs most of or all of the time. and also reported symptoms of anxiety or depression. Not enough women hear about postpartum depression while they're pregnant, meaning they may not have time to understand and prepare for it before they experience it. 47% of survey respondents heard about postpartum depression after the baby was born. Postpartum depression information is frequently shared during discharge from the hospital, when they are also receiving an extensive amount of information regarding their physical health and care for their baby-and their own mental health is a lower priority.

Neglecting Regular Healthcare

Preventative care is a crucial element for overall health and wellness, especially before pregnancy. Many women in the survey reported not getting routine check-ups that could identify conditions that would make pregnancy riskier. Many also reported that their doctors did not recommend regular well care at their postpartum checkups. Survey respondents consistently indicated caution for taking prescription medication when pregnant, including refusal, yet many medications are safe for pregnant women—if not even lifesaving.

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Misunderstanding Best Practices

Survey respondents reported a lack of communication with their healthcare providers about behaviors and practices to support healthy pregnancies, which result in healthy babies. Such instances are especially reported around prescription medications, spacing between births, kick counts, safe sleep and more.

Encountering Economic Struggles

Financial stability affects every aspect of a family's wellness. About a third of respondents rarely or never enjoy life without worrying about money, while less than half said they could make their monthly payments *often* for loans or utilities on time or without a late fee.' 31% of all survey respondents made less than \$25,000 each year, and 30% made between \$25,000 and \$49,999, suggesting many respondents represent the ALICE population (asset-limited, income-constrained, employed).

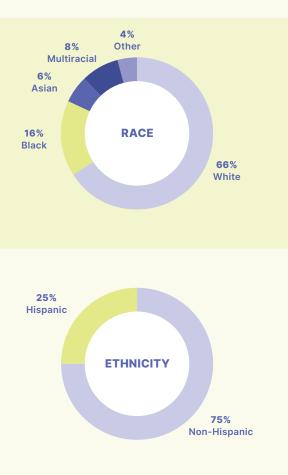
This executive summary highlights key insights from the Allen County Infant Mortality Study. To read the full report, visit **HealthierMomsAndBabies.org/Report**.

> ¹Healthier Moms and Babies administered an additional survey focused on preconception and interconception from December 2022-January 2023. Results from this survey are included in the full report and are available at HealthierMomsAndBabies.org/Report.

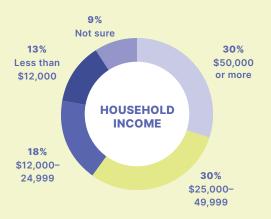
SURVEY METHODOLOGY

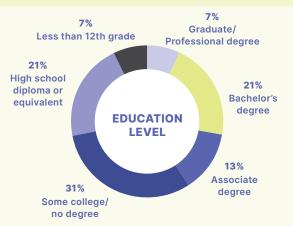
Healthier Moms and Babies partnered with Purdue University Fort Wayne Community Research Institute (CRI) to create a self-administered survey that was distributed by Healthier Moms and Babies from February to April 2022. The survey was available on the Healthier Moms and Babies website and was administered in English and Spanish. All responses were anonymous.

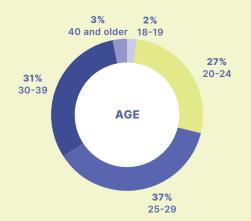
SURVEY Demographics











This report explores data and discoveries in the three key areas that impact babies' health:

Preconception and Interconception

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Pregnancy

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Postpartum and Infancy

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Preconception and Interconception

Preparing for Pregnancy



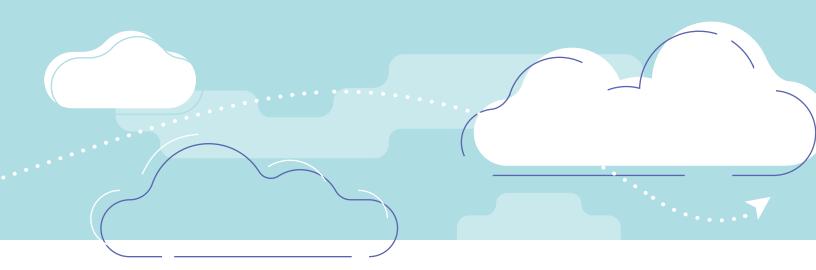
Many women **did not see a doctor for routine care in the 12 months before their pregnancy**. They cited **"feeling fine"** as one of the top reasons they haven't seen a healthcare provider.

SURVEY RESPONDENTS	DID NOT HAVE A REGULAR CHECKUP AT FAMILY DOCTOR	DID NOT HAVE A REGULAR CHECKUP AT OB/GYN	
PRE-CONCEPTION/ INTERCONCEPTION	34%	48%	
CURRENTLY PREGNANT / MOMS WHO RECENTLY GAVE BIRTH	44%	48%	



34%

of pregnant and new mother survey respondents indicated they took only some or none of the prescriptions they were prescribed during their pregnancy.

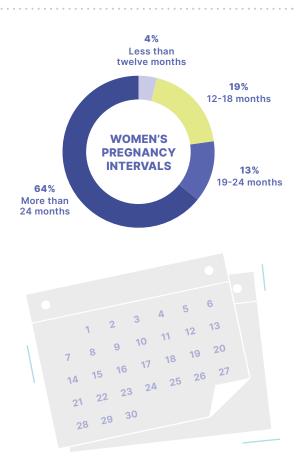


More than half of preconception/interconception survey respondents said they would be uncomfortable taking prescription medications while pregnant.

Studies have shown that women who got pregnant within a year of giving birth were twice as likely to deliver prematurely.²

The recommended pregnancy interval is at least **18-24 months** between delivery and the next pregnancy. Shorter pregnancy intervals create higherrisk pregnancies, but **some respondents did not have the recommended birth spacing**.

Less than half of women discussed how long to wait before their next pregnancy at their postpartum checkup.



² Source: Lonhart, J. A., Mayo, J. A., Padulad, A. M., Wise, P. H., Stevenson, D. K., & Shaw, G. M. (2019). Short interpregnancy interval as a risk factor for preterm birth in non-Hispanic Black and White women in California. Journal of Perinatology. https://doi.org/10.1038/s41372-019-0402-1

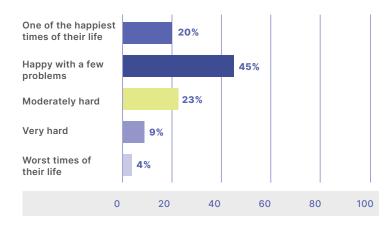
Pregnancy

Managing Mental Health

36%

of survey respondents said their most recent pregnancy was **moderately hard, very hard or one of the worst times of their life**.

Women's Emotions During Pregnancy



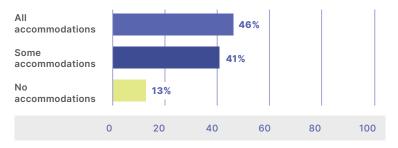
Respondents were more likely to report the availability of people's time, like **someone to talk to or getting a ride to a healthcare appointment**, than having someone who could loan them \$50.

Monitoring Physical Health

Gestational diabetes increases the risk of babies being born early and difficult delivery for mom. In 2020, **313** babies were **born to women with gestational diabetes** in Allen County.³ More than 2/3 of survey respondents worked during their most recent pregnancy, and 48% of them requested at least one accommodation from their employer.



Accommodations Received



Counting Kicks

Counting an unborn baby's kicks during pregnancy is an evidencebased practice that women can do at home to monitor the baby's wellbeing. It has been proven to reduce the chance of stillbirths, yet **30%** of survey respondents **did not use kick counts** during pregnancy. **53%** of those who used kick counts during pregnancy **heard about it from their doctor**.



Never heard of them

Didn't think it was helpful

Measuring kick counts helps families notice changes in the baby's activity level, allowing them to seek medical intervention during potentially crucial moments.

Postpartum and Infancy

Navigating New Life



40%

of currently pregnant survey respondents **had not heard about postpartum depression** from their healthcare provider. **90%** of survey respondents who recently had a baby **heard about postpartum depression from their healthcare provider during their postpartum checkup**.

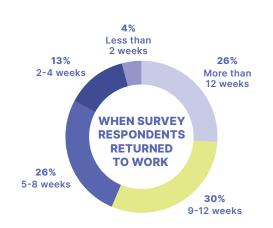
36%

of survey respondents with a new baby indicated receiving doctor's orders for bed rest, but only half of them followed those directives completely.



of respondents who **returned to work did so less than 8 weeks** after delivering their baby. Those who return less than 8 weeks after delivery cite doing so **for financial purposes and not having access to paid leave**.

Most obstetricians recommend women return to work 12 weeks after giving birth. There is no paid family leave requirement for employers in Indiana.



Understanding Maternal Mortality

In Indiana in 2020, a total of 92 pregnancy-associated deaths occurred during pregnancy or within one year of the end of pregnancy. 83% of pregnancyassociated deaths occurred postpartum, including 60% after 6 weeks. Indiana's Maternal Mortality Review Committee states that the majority of the state's maternal deaths are preventable. While pregnancy-related issues contribute to maternal death, the leading causes of maternal mortality are overdose, homicide and suicide.⁴ More than 1 in 5 survey respondents reported a form of physical, emotional or financial abuse or control now or in the past.



of survey respondents have **conflict or violence at home** some or all of the time. Of currently pregnant or new mother survey respondents, only 37% indicated a healthcare provider asked them if someone was hurting them at home.



Creating Safety for Babies

Safe sleep is a set of practices that create safe sleep environments for infants, reducing their risk of sudden unexpected infant death.

14% of infant mortality cases are preventable and related to unsafe sleep.⁵ Survey respondents recognized the importance of babies to sleep alone, on their back, in a crib or pack-and-play, but **many indicated unsafe sleep practices from time to time**.

Common Reasons for Using Unsafe Sleep Practices

- Easier to feed if they sleep in parents' bed
- Sleeps better in parents' bed
- Always had them sleep in parents' bed
- Sleeps better on tummy/side

The Path Forward

Since 1996, Healthier Moms and Babies has helped babies live and thrive — well beyond their first birthdays. We're resolute in our purpose: to uplift our most vulnerable families, for generations to come.

We are committed to championing and advocating on behalf of moms, babies and families. We will continue to convene our community's funders, healthcare providers and social service agencies to share and act upon the crucial information in this report.

Our Goals

Re-establish an infant mortality community action network.

We will convene an infant mortality community action network, made up of individuals and organizations who support moms, babies and families, to work corroboratively on recommendations in this report.

Double-down on safe sleep education through a twopronged approach.

We will amplify community-based messaging around ABC's of safe sleep and reinforce that education by taking an individualized approach with parents and caregivers. Understanding and remedying each family's barriers will reduce the number of preventable safe sleep deaths. Promote safe medication use, especially during pregnancy.

We will create messaging around safe medication use, encouraging individuals to consult with their healthcare provider before stopping any medications to reinforce the idea that not all prescriptions are unsafe for pregnancy.

Improve use of kick counts.

We will identify strategies for healthcare providers to better educate families on what kick counts are, why they're important and how to use them correctly. We will also continue to implement kick counts education in our programs.

Destigmatize maternal mental health.

We will bolster awareness of mental health symptoms and encourage parents to speak up when they have symptoms, especially if they feel they are not being heard by their healthcare provider, partner, family members or friends.

Increase screenings for domestic violence.

We will address domestic violence amongst new parents by working with healthcare providers and social service agencies to increase screenings for abuse.

Get Involved

Armed with this information, we can do more to help families in Allen County and prevent our families, friends and neighbors from suffering early deaths. **Join us in our mission to reduce infant mortality.** Volunteer with Healthier Moms and Babies.

> Donate to Healthier Moms and Babies at

Share this information with your family, friends and peers.

HealthierMomsAndBabies.org/Donate

About Healthier Moms and Babies

Healthier Moms and Babies is a private, nonprofit organization dedicated to bettering our community's future by promoting the health and safety of today's—and tomorrow's—moms, babies and families. We provide programs, resources and education to families of all sizes, structures, cultures and experiences. In everything we do, we meet families where they are in their journey, and we do it with an open mind, our hearts on our sleeves and an above-and-beyond approach.

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Healthier Moms & Babies

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Bold Compassion.