

Infant Death in North Carolina

Overview

North Carolina has one of the most serious infant mortality problems in the nation. Despite improvements in our infant death rates (also called infant mortality rate) NC still ranks among the worst in the nation year after year. This fact sheet provides information about infant mortality and what we know about it in our state.

Racial and Ethnic Disparities

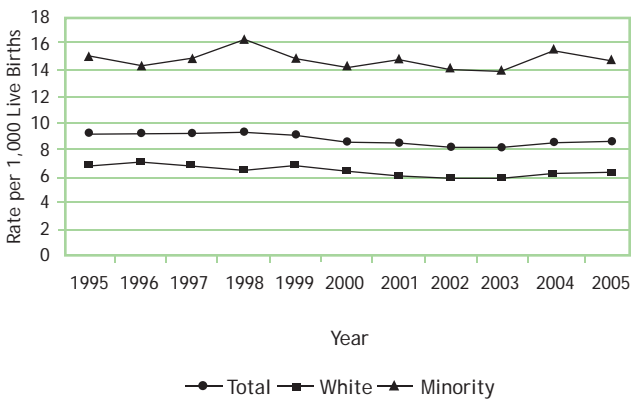
For every 1,000 babies born in NC in 2005, 8.8 died before reaching their first birthday. As you can see from the graph, the rate of infant deaths among racial minorities was twice the rate of whites. Of minority births, 14.9 died as infants compared to 6.4 per 1,000 births for whites.

Infant deaths among babies of Hispanic ethnicity was lower than non-Hispanic. For each 1,000 Hispanic live births, there were 4.7 infant deaths.

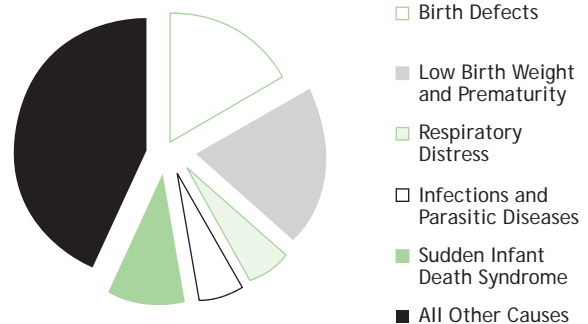
Causes of Death

The largest cause of death among babies was being born too small to survive (less than 5 and a half pounds), but birth defects, respiratory distress and SIDS make up a big part of the remaining deaths. There is a fifth group, called Other Predelivery Conditions, that accounts for about one-fifth of all infant deaths. This group is made up of several conditions that happen while the baby is still in the womb.

Infant Mortality Rates, By Race, North Carolina, 1995-2005



Infant Deaths by Cause, 2005



Level of Care for Very Small Infants

Despite the need for extra care at birth, more than a quarter of the births of very small infants (1.1 to 3.3 pounds) occurred in a hospital without a neonatal intensive care ward. While many low weight births are unexpected, chances of survival for premature babies can be improved by ensuring that high risk pregnancies are delivered in hospitals with specialized intensive care units.

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Infant Death in North Carolina, cont.

Birthweight and Gestation

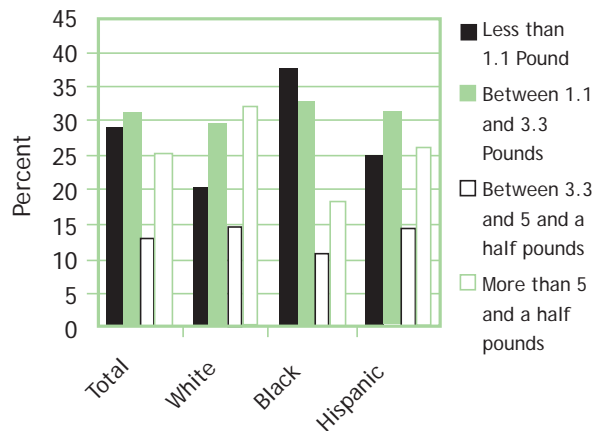
One of the largest determinants of survival of an infant is the baby's weight at birth. About three-fourths of all infants who died were born weighing five and a half pounds or less (<2500 grams). Although there have been dramatic recent medical improvements, many of these babies are not developed enough to survive their first year.

Of infant deaths in 2005, about half were delivered at less than 28 weeks gestation. Only about a quarter of the infant deaths had reached full development (37 or more weeks).

There are some striking facts in low birth weight rates in NC in 2005.

- African American births are 4 times as likely to be extremely low weight (weighing a pound or less).
- Hispanic women have lower infant death rates than White and African American women at extremely low birth weights (<1.1 pounds) and at full weight (more than 5 and a half pounds).
- According to the March of Dimes, a healthy infant costs around \$2,600 in the first year if its life, while a premature birth costs around \$41,600.

Infant Deaths by Birthweight, 2005



What is the N.C. Women's Health Branch Doing About Infant Mortality?

The Women's Health Branch promotes healthier pregnancies and healthier babies by developing and funding numerous programs.

Specifically, the Women's Health Branch:

- Helps women plan their pregnancies and space them for the best possible health of the baby and mother,
- Provides pregnant mothers with support services for a range of medical and social issues that may complicate their pregnancies,
- Provides services for women with high risk medical conditions that threaten the health of the mother and baby, such as diabetes,
- Provides genetic testing, follow-up, and counseling for persons with sickle cell syndrome,
- Provides resources for maternal and child health support programs in counties and towns that need more services,
- Supports teen pregnancy prevention and parenting programs to help teens make better choices for the future,
- Provides prenatal care services, maternity care coordination, maternal outreach services, nutrition counseling and other pregnancy and pre-pregnancy services in local health departments,
- Assists populations with health disparities in developing culturally sensitive, programs through grant opportunities, and
- Trains health care professionals in state of the art methods in smoking cessation, prenatal care, and post-delivery infant care.

Contact Us:

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