

## Infant Mortality

Reduce the 5-year infant mortality rate from 6.9 per 1,000 births in 2010-2014 to 6.0 by 2020

SD Rate	SD 2020 Target	US Rate
6.5 (2013-2017)	6.0	5.9 (2016)

### Significance:

Infant mortality is considered a gold standard for measuring the health of a population. The causes of infant mortality (death of an infant before age one) vary widely from case to case and can be attributed to many things including the health of the mother before and during pregnancy, how early the pregnancy was identified, the amount and quality of prenatal care received, the home environment, and the type of care the baby receives at home.

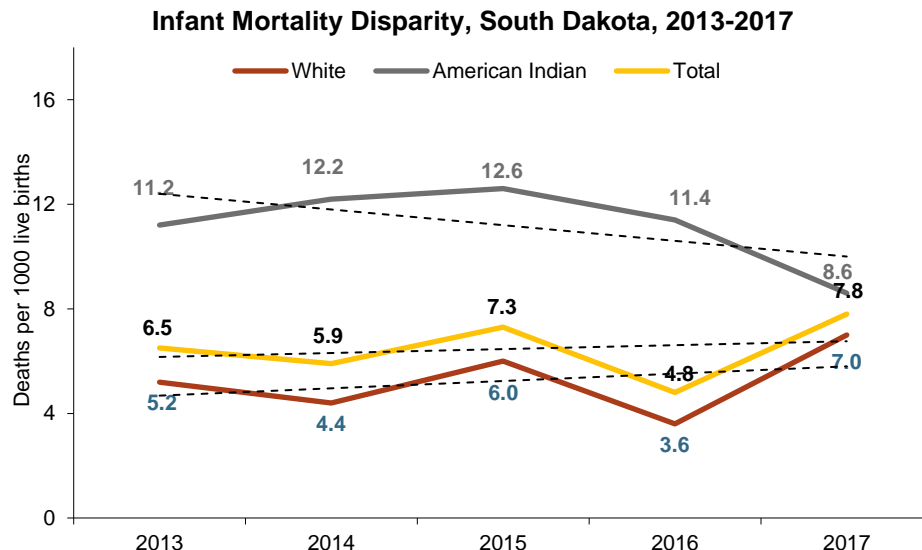
For 2013-2017, the leading causes of infant mortality in South Dakota were: (1) congenital anomalies; (2) short gestation/low birth weight; (3) accidents; and (4) SIDS. Many of these deaths are preventable which means we can make a difference by recognizing the early signs of pregnancy, starting prenatal care as soon as possible, using safe sleep practices, and if using tobacco, quitting.

From 2008-2016, the infant mortality rate among American Indians in South Dakota was twice as high as the white infant mortality rate; however, in 2017 the American Indian rate was only 1.2 times higher than the white infant mortality rate. Low levels of early prenatal care correlate directly with high infant mortality rates. There are six counties in SD that have less than 50% of pregnant women receiving prenatal care in the first trimester. Four of these same counties also have higher infant mortality rates than the state rate. In 2017, 12.6% of mothers smoked while pregnant. The most recent US rate is 7.2 in 2016. Parental smoking is a risk factor for SIDS, complications from prematurity and low birth weight, and other pregnancy problems.

**Definition:** Infant deaths per 1,000 live births

**Data Source:** South Dakota Vital Statistics Data

### Statistical Trends:



**Date Last Updated:** 01/02/2019