INFANT MORTALITY in South Dakota

NEONATAL, POST-NEONATAL, AND TOTAL INFANT MORTALITY RATES, 5 YEAR AVERAGES (2011-2020)

Five-year average infant mortality rates show that overall rates have been decreasing over the past decade, but the decline has stalled in recent years.

Neonatal deaths (occurring in infants aged 0-27 days) have been declining while post-neonatal deaths (28-364 days) have increased slightly.

INFANT MORTALITY RATES BY RACE AND HISPANIC ORIGIN, (2011-2020)

Overall trends in American Indian infant deaths have shown declining rates; however, the American Indian infant mortality rate is still two to three times higher than the White infant mortality rate.

An average of 77 infants died each year before their first birthday in South Dakota from 2016-2020

PERCENT OF INFANT DEATHS BY CAUSE (2016-2020)

- Perinatal period conditions (N=141): 36.7%
- Congenital anomalies (N=97): 25.3%
- Other causes (N=67): 17.4%
- Accidents-Injury (N=46): 12.0%
- Sudden Infant Death Syndrome (N=23): 6.0%
- Assault/Homicide (N=8): 2.1%

Perinatal period conditions and congenital anomalies were the top two causes of infant deaths, accounting for 238 total deaths.

- 35% of deaths described as perinatal period conditions were related to short gestation and low birth weight
- 74% of accident-injury deaths were due to accidental suffocation and strangulation
- 52% of deaths that were categorized as accidents-injury, Sudden Infant Death Syndrome, and other causes were associated with an unsafe sleep environment

*Deaths were assigned an ICD-10 code W75 (accidental suffocation and strangulation in bed) or terms listed under the cause of death on the death certificate included unsafe sleep position/environment, co-sleeping, overlay, or bed sharing.

For more information and explanation of causes, view the full Infant Mortality and Prevention report at https://doh.sd.gov/statistics/infant-mortality/.
Reducing Infant Mortality in South Dakota

The Office of Child and Family Services (OCFS) is the outreach arm of the SD DOH. OCFS staff work to build equitable systems of care and provide direct family health services to thousands of South Dakotan families. The OCFS puts a specific emphasis on improving maternal and infant health outcomes including infant mortality.

Prevention efforts focus on two areas - maternal health (impacting deaths from the perinatal period and congenital anomalies) and infant safe sleep (impacting sleep-related deaths).

MATERNAL HEALTH (Perinatal period conditions and congenital anomalies)
The Office of Child and Family Services supports women across the lifespan so that they can have healthy pregnancies. Maternal health is closely linked to infant health outcomes.

- **Bright Start Nurse Visiting**: Pairs nurses with new families to work to improve pregnancy outcomes, child health and development, and family self-sufficiency.
- **Pregnancy Care Program**: Provides risk assessment of women and subsequent modified case management for eligible women.
- **Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)**: A nutrition and breastfeeding education and counseling program that helps to improve healthy lifestyle choices and promote sound food buying habits. It also provides referrals to community agencies, social programs, and preventative health.

SLEEP-RELATED DEATHS
From 2016-2020 the statewide Child Death Review Team found that nearly 8 out of 10 infant deaths that occur after hospital discharge occurred in an unsafe sleep environment. The OCFS provides these programs and services related to safe sleep.

- **Distributes over 1,000 safe sleep kits** (includes a Pack ‘n Play) through DOH Community Health Offices and community partners to families in need of a safe place for baby to sleep. This is made possible through a public private partnership with the National Cribs for Kids Program.
- **Infant Safe Sleep Workgroup**: Focuses on evidence-based strategies to increase safe sleep practices for infants. This collaborative group has representatives from Avera Hospital System, Sanford Children’s Hospital, DSS Childcare Services, SDSU Extension—Early Childhood, Lach’s Legacy Foundation, and the Avera Research Institute on the Pine Ridge reservation.
- **Educates families about safe sleep**: through advertisements in parenting magazines, posts on the For Baby’s Sake Facebook page, and safe sleep radio ads on SD reservations.
- **Works with birthing hospitals throughout the state to promote Safe Sleep Bronze-level certification** across their systems. This ensures that hospital policies and staff messaging are consistent with evidence-based safe sleep practices.
- **Edicates families of newborns on safe sleep practices** by including the Sleep Baby Safe and Snug book in the governor’s Strong Families mailings.
- **Provides infant safe sleep education** to all families in WIC, Bright Start, and Pregnancy Care.
- **Standardized how Bright Start nurses are working with clients** who indicate they don’t have a safe sleep plan for their infant through implementation of a CQI project. Nurses are now using the handout Conversations Count: Helping all families understand safe sleep guidelines starts with better conversations.