

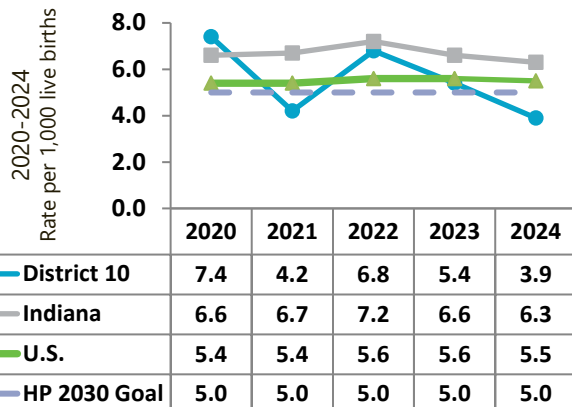
Infant Mortality

Health First Indiana, District 10 - 2024



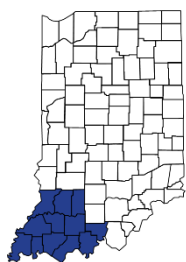
Division of
Family Health Data
and Fatality Prevention

Infant Mortality Rates



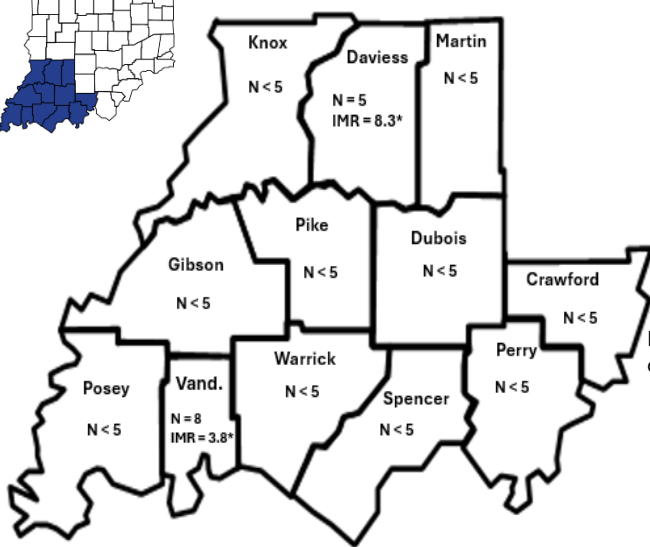
Infant Mortality Facts

- Infant mortality is defined as the death of a baby before his or her first birthday
- The infant mortality rate (IMR) is the number of babies who die in the first year of life per 1,000 live births
- In 2024, there were 509 infant deaths across the state, making the infant mortality rate 6.3
- Of the 509 Indiana infant deaths in 2024, 22 occurred in District 10
- Non-Hispanic (NH) Black infants are 2.4 times more likely to die than NH White infants in Indiana

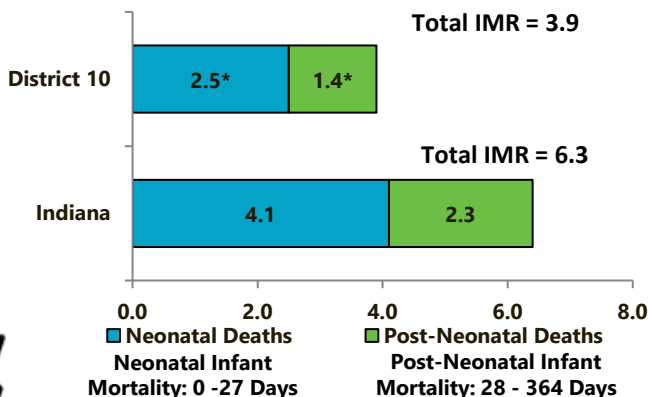


District 10

IMR = 3.9
N = 22



Infant Mortality Rates by Age at Death, 2024

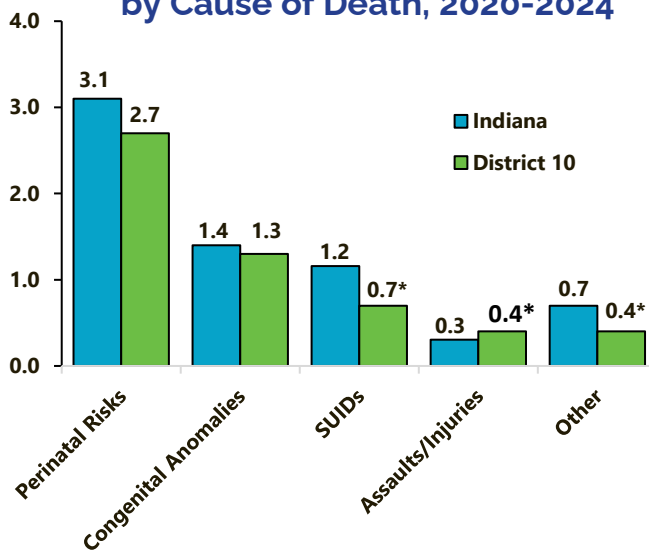


Note: Age-specific mortality rates may not sum to the overall IMR and cause-specific percentages may not sum to 100% due to rounding.

How to Reduce Infant Mortality

- Improve overall health for women of child-bearing age
- Promote early and adequate prenatal care
- Decrease early elective deliveries before 39 weeks
- Decrease prenatal smoking and substance use
- Increase breastfeeding duration and exclusivity
- Support birth spacing and interconception wellness
- Promote the ABCs of safe sleep: place baby to sleep alone, on his or her back, in a crib

Infant Mortality Rates by Cause of Death, 2020-2024



Birth Outcome Indicators

Health First Indiana, District 10 - 2024



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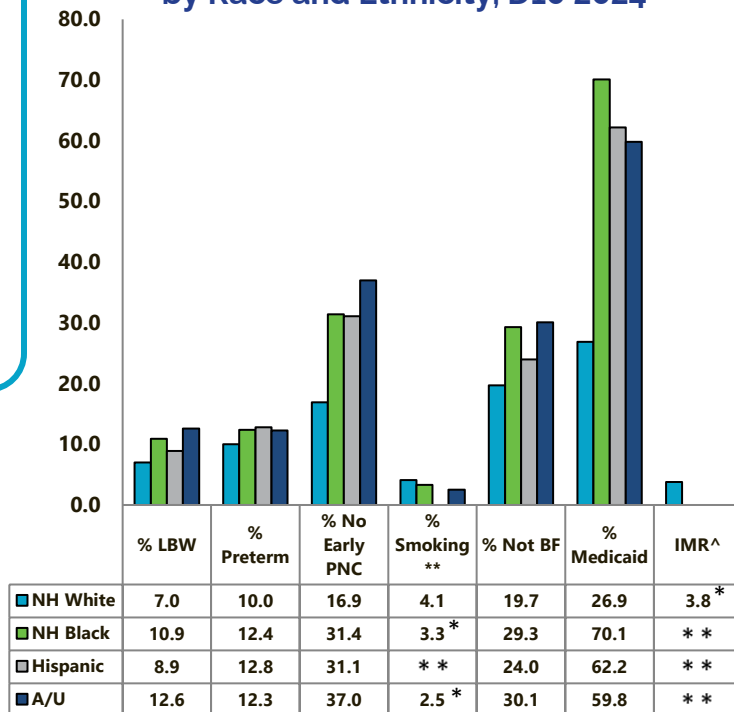
Indiana Quick Facts

- Smoking rates among pregnant women continue to be higher than the national rate
- Just over 1/4 of pregnant women do not receive early prenatal care (PNC)
- NH Black infants in Indiana are more likely to be LBW or preterm
- NH Black and Hispanic women in Indiana are more likely to not receive early prenatal care (1st trimester)
- NH White women in Indiana are more likely to smoke during pregnancy

District 10 Quick Facts

- 5,634 live births in 2024
- Lower percentages of preterm and low birthweight births compared to the state of Indiana
- Higher percentage of women receiving early PNC compared to Indiana
- Lower percentage of women smoking during pregnancy compared to Indiana
- Lower percentage of breastfeeding at hospital discharge compared to Indiana

Birth Outcome Indicators by Race and Ethnicity, D10 2024



[^] = Rate per 1,000 live births

* Numerator fewer than 20, rate unstable

** Numerator fewer than 5, rate suppressed

A/U = Additional/Unknown

NH = Non-Hispanic

LBW = Low Birthweight PNC = Prenatal Care BF=Breastfeeding IMR = Infant Mortality Rate

	% LBW (< 2,500 G)	% PRETERM (< 37 WKS GESTATION)	% NO EARLY PNC (1 ST TRIMESTER)	% SMOKING**	% NOT BREASTFEEDING	% MOTHER ON MEDICAID
CRAWFORD	9.9*	14.3*	27.5	9.9*	22.0	44.0
DAVISS	6.8	8.2	39.1 ^S	3.2*	15.2	27.0
DUBOIS	6.9	11.8	16.3 ^S	2.8*	24.7 ^S	30.9
GIBSON	6.3	9.2	14.0 ^S	4.5*	18.2	32.2
KNOX	7.6	13.2	17.1 ^S	7.4 ^S	27.1 ^S	43.4
MARTIN	7.2*	12.6*	15.3*	9.9*	17.1*	24.3
PERRY	10.6*	14.0	29.6	7.8*	26.8 ^S	36.3
PIKE	5.7*	6.5*	9.8*	4.1*	20.3	33.3
POSEY	6.9*	9.4	10.5 ^S	4.0*	23.2 ^S	27.5
SPENCER	7.7*	10.0	13.6 ^S	2.7*	17.7	23.6
VANDEBURGH	9.1	10.8	21.4 ^S	3.3	23.2 ^S	41.9
WARRICK	5.8	9.7	13.1 ^S	**	16.0	21.6
DISTRICT 10	7.8	10.5	20.3	3.7	21.3	34.4
INDIANA	8.5	10.9	27.3	3.8	15.6	40.4

* = Fewer than 20 birth outcomes, percentage unstable

** = Fewer than 5 birth outcomes, percentage suppressed.

S = County significantly different from state (**significance not calculated for Mothers on Medicaid**).

**Due to a change in reporting methods, smoking during pregnancy should not be compared to previous years data.