

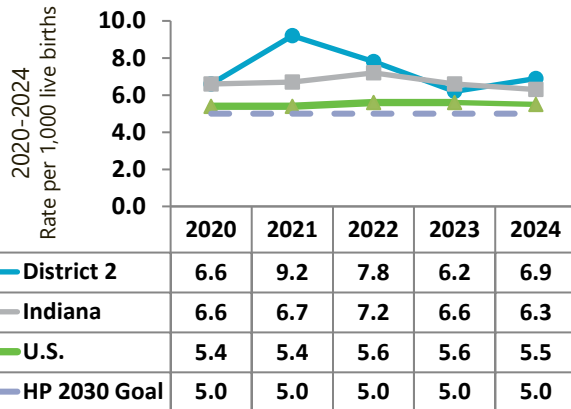
# Infant Mortality

## Health First Indiana, District 2 - 2024



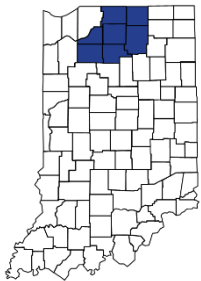
Division of  
Family Health Data  
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### Infant Mortality Rates



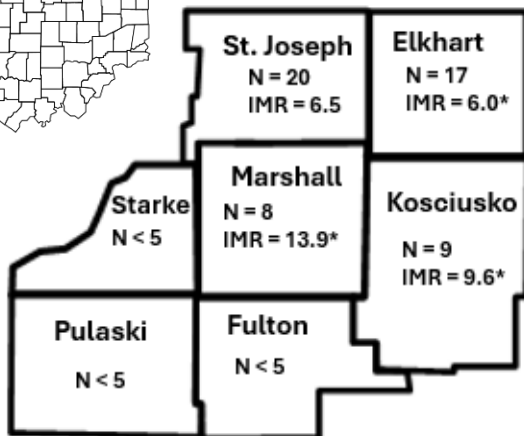
### Infant Mortality Facts

- 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, 55 occurred in District 2
- Non-Hispanic (NH) Black infants are 2.4 times more likely to die than NH White infants in Indiana

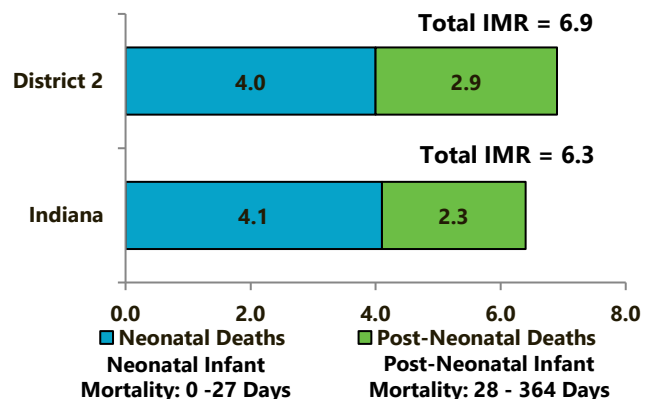


### District 2

IMR = 6.9  
N = 55



### Infant Mortality Rates by Age at Death, 2024

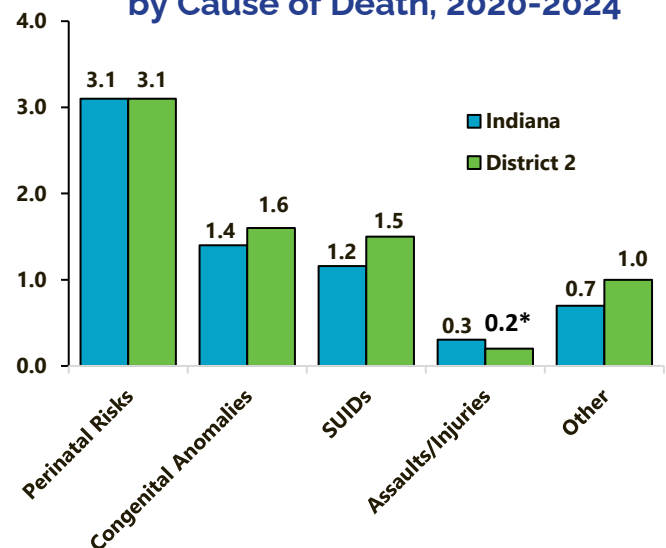


Note: Age-specific mortality rates may not sum to the overall IMR and cause-specific percentages may not sum to 100% due to rounding.

### 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 2 - 2024



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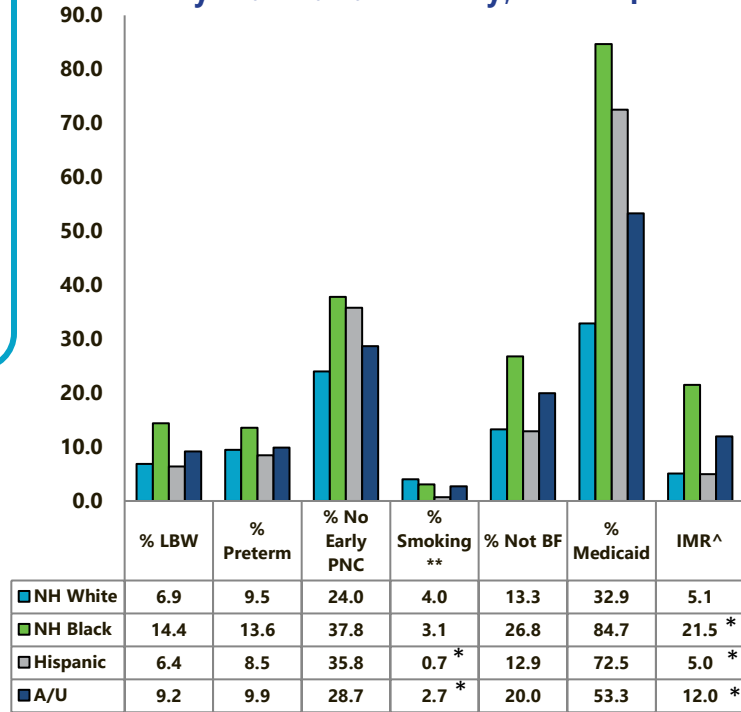
### Indiana Quick Facts

- 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 2 Quick Facts

- 8,018 live births in 2024
- Lower percentages of preterm and low birthweight births compared to the state of Indiana
- Lower percentage of women receiving early PNC compared to Indiana
- Lower percentage of women smoking during pregnancy compared to Indiana
- Higher percentage of breastfeeding at hospital discharge compared to Indiana

### Birth Outcome Indicators by Race and Ethnicity, D2 2024



<sup>^</sup> = 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 <sup>ST</sup> TRIMESTER)	% SMOKING**	% NOT BREASTFEEDING	% MOTHER ON MEDICAID
ELKHART	7.3	9.6	29.9	2.7	9.9 <sup>S</sup>	46.0
FULTON	8.1*	9.6	35.9	5.3*	25.4 <sup>S</sup>	47.4
KOSCIUSKO	6.2	7.3 <sup>S</sup>	24.3	3.8	18.5	38.7
MARSHALL	6.6	8.3	30.5	4.3	19.2	45.6
PULASKI	5.6*	8.9*	22.6	8.1*	24.2	41.1
STARKE	9.7	14.9	22.9	5.9*	14.6	47.6
ST. JOSEPH	8.3	10.4	26.7	2.7	16.1	49.3
DISTRICT 2	<b>7.6</b>	<b>9.7</b>	<b>27.8</b>	<b>3.2</b>	<b>14.8</b>	<b>46.4</b>
INDIANA	<b>8.5</b>	<b>10.9</b>	<b>27.3</b>	<b>3.8</b>	<b>15.6</b>	<b>40.4</b>

\* = Fewer than 20 birth outcomes, percentage unstable

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.