



The **Celebrate Day 366...Every Baby Deserves a Chance Infant Mortality Awareness Campaign** supports and inspires people from around the nation to take action in support of the Healthy People 2030 goal to improve the health and well-being of women, infants, children and families. Help the National Healthy Start Association celebrate babies living beyond the first year of life and be part of the generation that ensures that every baby has a chance...

*...To take their first step. To say their first word.
To graduate from college. To become President.*

To Celebrate Day 366.

What is infant mortality?

Infant mortality is the number of infants who die during their first year of life. It is measured by the Infant Mortality Rate (IMR), which is the number of infant deaths per 1,000 live births in a given year. The Infant Mortality Rate is commonly accepted as a measure of the general health and well-being of a population.

How does the United States compare to the world?

In 2021, the United States ranked 36th out of 48 countries in infant mortality, according to the Organization for Economic Cooperation and Development.¹

Infant Mortality Statistics

- In 2022, the IMR in the United States is 5.547 infant deaths per 1,000 live births.²
- With a rate of 10.8 deaths /1,000 live births, African Americans have the highest infant death rates among all ethnic and population groups.³
- Educational discrepancies are also apparent across color lines when confronted with infant mortality. The infant mortality rate for African American mothers with over 13 years of education was almost three times that of Non-Hispanic White mothers in 2005.⁴
- In 2020, the leading causes of infant death were birth defects, preterm birth and low birthweight, Sudden Infant Death Syndrome, unintentional injuries and maternal pregnancy complications.⁵
- According to a 2021 Centers for Disease Control and Prevention National Vital Statistics Report, IMRs from 2018 through 2019 for unintentional injuries increased from 30.8 infant deaths per 100,000 births to 33.7, while IMRs declined for disorders related to preterm birth and low birthweight and maternal complications.⁶

- Discrimination is also a documented source of harmful stress. One study found that women who gave birth to very low birth weight babies were more likely to have experienced racial discrimination than women who had normal weight babies.⁷

How can reducing the IMR benefit the U.S.?

- Significant savings can accrue from enabling mothers to add a few ounces to a baby's weight before birth. An increase of 250 grams (about 1/2 lb) in birth weight saves an average of \$12,000 –\$16,000 in first year medical expenses.⁸
- Prenatal interventions that result in a normal birth (over 2500 grams or 5.5 pounds) saves \$59,700 in medical expenses in the infant's first year.⁹
- The long-term cost of low birthweight infants includes re- hospitalization costs, many other medical and social service costs, and often large special education expenses, when the child enters school. These public expenses can go on for a lifetime.¹⁰

Healthy Start to the Rescue

The federally funded Healthy Start programs are community-driven and located in some of the most economically distressed neighborhoods in the United States. Since its initiation in 1991, Healthy Start has served hundreds of thousands of families. Over 63% of all Healthy Start families are African American, Hispanic or Native American. Healthy Start specializes in outreach and home visiting — the surest way to reach the most women and families in need of services.

Healthy Start focuses on getting women into prenatal care as early in the pregnancy as possible. It is generally accepted by medical & research fields that early entrance into prenatal care is the single most critical factor in improving birth outcomes. Healthy Start has pioneered the engagement of women living in the community as outreach workers and home visitors as an effective practice to successfully reach families who are most likely to experience poor birth outcomes. As a network rooted in the local community, the federal Healthy Start Initiative is distinguished as a unique delivery system where program participants are engaged and active in the quest to eliminate health disparities in their own lives, in their communities, and across the nation.

Healthy Start and NHSA promote awareness during September, National Infant Mortality Awareness Month (NIMAM). To learn more about infant mortality and Healthy Start or to plan NIMAM activities in your community, please contact the National Healthy Start Association.



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- 1 Infant Mortality Rates, OECD Data, <https://data.oecd.org/healthstat/infant-mortality-rates.htm>
- 2 U.S. Infant Mortality Rate 1950-2022, Macrotrends, <https://www.macrotrends.net/countries/USA/unitedstates/infant-mortality-rate>
- 3 Infant Mortality and African Americans, Office of Minority Health, U.S. Department of Health and Human Services, <https://www.minorityhealth.hhs.gov/omh/browse.aspx?lvl=4&lvlid=23>
- 4 Mathews, T.J, MacDorman MF, Infant Mortality Statistics from the 2006 Period Linked Birth/Infant Death Data Set, National Vital Statistics Reports, Vol. 58, No. 17, 2010.
- 5 Infant Mortality, Centers for Disease Control and Prevention, <https://www.cdc.gov/reproductivehealth/maternalinfanthealth/infantmortality.htm>
- 6 Ely DM , Driscoll, AK, Infant Mortality in the United States, 2019: Data from the Period Linked Birth/Infant Death File, National Vital Statisc Report, Vol. 70, No.14, December 8, 2021, <https://stacks.cdc.gov/view/cdc/111053>
- 7 Kashef, Z, Persistent Peril: Why African American Babies Have the Highest Infant Mortality Rate in the Developed World, Feb. 2003, RaceWire, 1 July 2011 <http://www.arc.org/racewire/030210z_kashef.html>
- 8, 9, 10 Rogowski, Cost-effectiveness of Care for Very Low Birthweight Infants. March of Dimes Perinatal Data Center, Pediatrics 012(1)35-43 (1988)